2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M14000006503

Entity Name: PAG ORLANDO GENERAL, LLC

Current Principal Place of Business:

2555 TELEGRAPH RD

BLOOMFIELD HILLS, MI 48302

Current Mailing Address:

2555 TELEGRAPH RD

BLOOMFIELD HILLS, MI 48302 US

FEI Number: 26-1207380 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

Title MBR Title F

Name UAG KISSIMMEE MOTORS, LLC Name LEVITZKI, WAYNE

Address 2555 TELEGRAPH RD. Address 2555 TELEGRAPH RD.

City-State-Zip: BLOOMFIELD HILLS MI 48302 City-State-Zip: BLOOMFIELD HILLS MI 48302

Title ST Title VP

NameSCIORILLI, ANTHONYNameZINITI, JOSEPH MAddress2555 TELEGRAPH RD.Address2555 TELEGRAPH RD.

City-State-Zip: BLOOMFIELD HILLS MI 48302 City-State-Zip: BLOOMFIELD HILLS MI 48302

Title AS Title AS

NameFEHER, MAGGIENameKURNICK, ROBERT H JRAddress2555 TELEGRAPH RDAddress2555 TELEGRAPH RD

City-State-Zip: BLOOMFIELD HILLS MI 48302 City-State-Zip: BLOOMFIELD HILLS MI 48302

Title ASSISTANT TREASURER

Name HULGRAVE, MICHELLE CHRISTINE

Address 2555 TELEGRAPH RD

City-State-Zip: BLOOMFIELD HILLS MI 48302

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MAGGIE FEHER ASSISTANT SECRETARY 04/01/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date

FILED Apr 01, 2022

Secretary of State

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