6/20/2009 0590409

Commonwealth of Kentucky Trey Grayson, Secretary of State

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Trey Grayson Secretary of State P. O. Box 718 Frankfort, KY 40602-0718 (502) 564-3490 http://www.sos.ky.gov

Statement of Change of Registered Office, Registered Agent, or Both

Pursuant to the provisions of KRS chapters 271B, 273, 275, or 362, the undersigned hereby applies to change the registered office, registered agent, or both on behalf of

AUTO VENTURE ACCEPTANCE, LLC

which is organized in the state of Kentucky, and for that purpose submits the following statements:

1. Name of current registered office	2. Registered agent is hereby changed to:
MICHAEL BERNARD	MICHAEL BERNARD
3. Address of current registered office	4. Registered office is hereby changed to:
1515 HEPBURN AVE. #5 LOUISVILLE, KY 40204	222 E Witherspoon St, Unit 1601 LOUISVILLE, KY 40202
TER OF ED	WE

5. Signature of officer or chairman of the board	6. Consent of new agent
Michael Bernard, member	I consent to serve as the new registered agent on behalf of this corporation.
Signature and Title	Michael Bernard
	Signature and Title
Type or print name and title	
6/20/2009 4:01 PM	Type or print name and title
Date	

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