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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: KEYSTONE AUTOMOTIVE INDUSTRIES RESOURCES, INC.
(Name of Corporation)
DOCUMENT NUMBER: F02000004347
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
JILL PROBST (Name of Contact Person)
(Name of Contact Person)
NATIONAL SERVICE INFORMATION
(Firm/Company)
145 BAKER ST
(Address)
MARION OHIO 43302
(City/State and Zip Code)
For further information concerning this matter, please call:
JILL PROBST at (740) 387-6806 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this nge is submitted for a corporation organized under the laws of the State of DE r to change its registered office or registered agent, or both, in the State of Florida.
1. The name of t	he corporation: KEYSTONE AUTOMOTIVE INDUSTRIES RESOURCES, INC.
2. The principal	office address: 655 GRASSMERE PARK DRIVE NASHVILLE TN 37211
3. The mailing a	ddress (if different):
4. Date of incorp	poration/qualification: 08/26/2002 Document number: F0200004347
5. The name and	street address of the current registered agent and registered office on file with the tment of State:
	CORPORATION SERVICE COMPANY
	1201 HAYS STREET
	TALLAHASSEE FL 32301-2525 US
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office
	NRAI Services, Inc.
	2731 Executive Park Drive, Suite 4
	Weston, FL 33331 Weston FL 33331
The street addre	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so ne board, or the corporation has been notified in writing of the change.
Malest (Signature	Like of an officer or director) (Printed or typed name and title) Scoretory
I hereby accept I further agree to of my duties, an document is bei corporation has	the appointment as registered agent and agree to act in this capacity, to comply with the provisions of all statutes relative to the proper and complete performance and I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the seen notified in writing of this change.
Jui f	nobst Asst. Secretary 2-8-08 gnature of Registered Agent) (Date)
If signing on be	half of an entity:
Jill	Prokst Fyped or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

* * * FILING FEE: \$35.00 * * *