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(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
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R. WHITE

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: ALL AMERICAN PARTS AND SERVICE INC.
DOCUMENT NUMBER: P1200085521
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:
Name of Contact Person Judd Ulrich et al- Firm/Company 2940 S. TAMIAMI TR, Address SARADOTA, FC 34239 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
KURT E. CEE at (941) 958-5700 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

· TO:

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Louba
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: ALL AMERICAN PARTS AND SERVICE INC.
2. The principal office address: 6/30 PORTER RA, SARASOTA, FL 34240
3. The mailing address (if different):
4. Date of incorporation/qualification: 10/16/12_ Document number: P/20000 8552/
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
KEN CLAYTON SE ST
6/30 PORTER RD, 27
SARASOTA, FC 34240
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
MICH E. LEE
JHOD ULRICH exal.
JUDA ULRICH exal. P.O. BOX NOT acceptable 2940 S. TAMIAMI TR., SARASOTA, FC 34239
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was anthorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
Migniture of an officer or director Printed or typed frame and title
Thereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duites, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
Signature of Registered-Agent Date
If signing on behalf of an entity:
Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR26045 (03/12)