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SECRETARY OF STATE
ALLIAHASSEE FLORIN

TRANSMITTAL LETTER

TO:	Amendment Section Division of Corporations	-		-	·	
SUBJ	ECT: National Automotive	Industrial Supp	ly, Inc.		: 	
DOC	UMENT NUMBER: P990	•				
The en	closed Resignation of Regist	ered Agent for a	Corporation	on and fee are s	submitted for filing.	
Please	return all correspondence co	ncerning this mat	tter to the	following:		
Jaso	n A. Rosenthal					
	(Name of Pers	on)			ř.	
Fole	y & Lardner					
	(Name of Firm/Co	трапу)	- <u>-</u>		i -	
1111	N. Orange Ave., Suite 180	0			* *	
	(Address)		-	;	; ·	
Orlar	ndo, FL 32801					
	(City/State and Zip	Code)			• 1 in	
For fur	ther information concerning	this matter, pleas	e call:			
Jasor	A. Rosenthal	at (107	423-7656 Daytime Teleph		
	(Name of Person)	(Ar	ea Code &	Daytime Teleph	one Number)	
Enclos or \$35.	ed is a check made payable to 00 for an administratively dis	the Florida Dep ssolved, voluntar	artment of ily dissolv	f State for \$87. ed or withdraw	50 for an active corpor n corporation.	ration
Amend Division P.O. B	ng Address: Iment Section on of Corporations ox 6327 assee, FL 32314	Street Address Amendment Se Division of Cor 409 E. Gaines S Tallahassee, FL	ction porations treet		··· ·	
	•	· ·			:	

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 6	07.0502(2), 617.0	502(2), 607.15	09, or 617	.1509,	
Florida Statutes, the undersigned,Ja	son A. Rosentha		L.		
	·	ne of Registered A	- , ,		
hereby resigns as Registered Agent for	National Autom	notive Industria	al Şupply	, Inc.	,
, , ,	(N	ame of Corporation	n) ;		
P99000061002			-		
(Document Number, if known)			1		
A copy of this resignation was mailed t	o the above listed	corporation at i	ts last kno	wn address.	
The agency is terminated and the office	discontinued on t	he 31st day afte	r the date	on which	
this statement is filed.					
/LQM			N		
(-)	gnature of Resigning	Agent)			
If signing on behalf of an entity:	<u>:</u>		•	AAL SE	,
	Typed or Printed Nan	1e)	<u> </u>	OCT 29 CHETAR) AHASSI	7
	Typed of France ivan	(N)		Y OF	m
	_	48.80	: }⊊		O
	(Capacity)			るが	

Fee for filing this document:

\$87.50 - Active corporation
\$35.00 - Administratively dissolved/voluntarily dissolved/
withdrawn corporation

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314