

Statement of Change of Agent

DOMESTIC or FOREIGN Business Corporation

→ Filing Fee: \$20.00

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Pursuant to the provisions of RIGL <u>7-1.2-502</u> or <u>7-1.2-1409</u> the undersigned corporation submits the following statement for the purpose of changing its registered agent in the State of Rhode Island:

1. Entity ID Number	2. Exact Name of the Corporation		
64129	NATIONAL AUTO SPECIALTY, INC		
3. The address of the register	red office as PRESENTLY show	wn in the records on file with t	he RI Department of State:
Street Address 1050 MAIN ST	REET, SUITE 8		
City/Town EAST GREENWICH		State RHODE ISLAND	Zip 02818
4. The name of the registered	agent as PRESENTLY shown	in the records on file with the	RI Department of State:
ALFRED FERRUOLO, JR			
5. The address of the NEW re	egistered office is:		
Street Address (NOT a P.O. Box)	241 LINCOLN AVENUE		
City/Town WARWICK		State RHODE ISLAND	^{Zip} 02888
6. The name of the NEW regi	stered agent is:		
JOHN GAUTIERI			
7. Date when this Statement of	of Change of Registered Agent	will be effective: CHECK ONL	Y ONE BOX
Date received (Upon filin	g)		
Later effective date (Date	e must be no more than 30 day	rs from the day of filing)	
	clare and affirm that I have exa ments contained herein are tru		ge of Registered Agent by the
Name of Authorized Officer of the Corporation			Date
ROBERT MARTIN, PRESIDENT			10/18/2016
Signature of Authorized Office		IMENT HERE	L.,,,,
Mat E.	1/60	*1*3 - 1*1 1:1:1:1:	

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov FILED

OCT 24 2018

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