

L07000124813

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

(Business Entity Name)

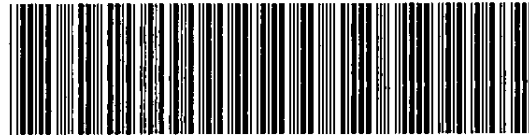
(Document Number)

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Special Instructions to Filing Officer:

**A. LUNT**  
MAR 23 2010  
**EXAMINER**

Office Use Only



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01/31/11--01016--003 \*\*25.00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2011 MAR 22 AM 10:17

FILED



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 4, 2011

GREGORY SCHWARTZ  
3876 SHERIDAN STREET  
HOLLYWOOD, FL 33021

SUBJECT: YAHR AVIATION, LLC  
Ref. Number: L07000124813

We have received your document for YAHR AVIATION, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

**SECTION 5B MUST BE COMPLETED.**

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt  
Regulatory Specialist II

Letter Number: 811A00003028



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 23, 2011

GREGORY SCHWARTZ  
3876 SHERIDAN STREET  
HOLLYWOOD, FL 33021

SUBJECT: YAHR AVIATION, LLC  
Ref. Number: L07000124813

We have received your document for YAHR AVIATION, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt  
Regulatory Specialist II

Letter Number: 511A00004510

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** YAHR AVIATION, LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Gregory Schwartz  
Name of Person

Schwartz Zweben  
Firm/Company

3876 Sheridan Street  
Address

Hollywood, Florida 33021  
City/State and Zip Code

gschwartz@szalaw.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Gregory Schwartz at ( 954 ) 9662483  
Name of Person Area Code & Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**Enclosed is a check for the following amount:**

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

FILED  
2011 MAR 22 AM 10:17  
TALLAHASSEE, FLORIDA  
CLERK OF COURT  
MAY 27 2011

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY**

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: YAHR AVIATION, LLC

2. (a) Principal office address of limited liability company: 17201 COLLINS AVE #1407

**(Note: MUST BE STREET ADDRESS)** Sunny isles, Florida 33160

(b) Mailing address of limited liability company: 17201 COLLINS AVE #1407

**(Note: MAY BE POST OFFICE BOX)** Sunny isles, Florida 33160

12/17/2007  
3. Date of filing/registration in Florida

L07000124813  
4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: \_\_\_\_\_

Registered Office Address: \_\_\_\_\_

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

NEW Registered Agent: Gregory Schwartz

NEW Registered Office Address: 3776 Stearns St  
**(MUST BE FLORIDA STREET ADDRESS)** Altamonte Springs, FL 32714

FILED  
2011 MAR 22 AM 10:18  
TALLAHASSEE, FL  
STATE DEPT. OF REVENUE

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

\_\_\_\_\_  
Signature of a member or authorized representative of a member

Gregory Schwartz  
Printed or typed name of signee

*I hereby 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 duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

\_\_\_\_\_  
Signature of Registered Agent

**Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314  
FILING FEE: \$25.00**