## P0400014789

(Re	equestor's Name)			
(Address)				
(Ac	idress)			
(CI	ty/State/Zip/Phon	e #)		
PICK-UP	MAIT	MAIL		
<b>(B</b> c	isiness Entity Nar	ne)		
(Dx	ocument Number)			
Certified Copies	_ Certificates	s of Status		
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## **COVER LETTER**

TO: Amendment Section Division of Corporations
SUBJECT: Backyard Automotive, Inc.  (Name of corporation)
DOCUMENT NUMBER: P04000014789
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:
Jennifer G. Maglio (Name of contact person)
Maglio Law Firm (Firm/Company)
2480 Fruitville Road Suite 6 (Address)
Sarasota, FL 34237 (City/state and zip code)
For further information concerning this matter, please call:
Jennifer G. Maglio  (Name of contact person)  at (941) 952-5242  (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address Street Address

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

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

statement of change is s	submitted for a corporation organize	607.1508, or 617.1508, Florida Statutes ad under the laws of the State of Florida ad agent, or both, in the State of Florida	L
1. The name of the corp	poration: Backyard Automotive, Inc.		
2. The principal office a	address: 6442 Wellesley Drive Brade	enton, FL 34207	
3. The mailing address (	(if different):		
4. Date of incorporation	n/qualification: 1/21/2004	Document number: P04000014789	)
5. The name and street a Florida Department of		nt and registered office on file with the	
Jennife	er G. Maglio		
1891 N	Main Street Suite 1100	<u> </u>	8 4 N
Saras	ota, FL 34236		製され
6. The name and street a (if changed):	address of the new registered agent (	(if changed) and /or registered office	SECULIAR SEC
Jennif	fer G. Maglio		SEC. L
2480 F	Fruitville Road Suite 6		T
<del></del>	(P.O. Box NOT acceptable)		
Saras	ota, FL 34237		
The street address of it as changed will be iden	is registered office and the street ad ntical.	dress of the business office of its regis	stered agent,
Such change was authorized by the board	orized by resolution duly adopted b d, or the comporation has been notif	by its board of directors or by an office fied in writing of the change.	er so
John P.	Knapky	John P. Knapko or Angela Knapko	
I further agree to comp of my duties, and I am document is being filed	pointment as registered agent and a ply with the provisions of all statute familiar with and accept the obliga d merely to reflect a change in the r notified in writing of this change.	(Printed or typed name and title) agree to act in this capacity. es relative to the proper and complete ation of my position as registered agei registered office address, I hereby con	performance nt. Or, if this firm that the
(Signature of		8/18/04 (Date)	
If signing on behalf of		(vau)	
(Typed or F	Printed Name)		

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