(Re	equestor's Name)	_
(Ac	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	÷#)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Use On	ly



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PREMIER CORPORATE SERVICES, INC.

200 West Adams Street, Suite 2007 Chicago, IL 60606 (312) 346-3606 (800) 934-2556

Fax: (312) 346-3607

November 9, 2006

VIA REGULAR MAIL

Division Of Corporations Florida Department Of State PO Box 6327 Tallahassee, FL 32314

RE: Deforest Enterprises, Inc.

Dear Sir or Madam:

On behalf of the above captioned corporation, enclosed is one original and one copy of the Statement of Change of Registered Agent, together with a check in the amount of \$35.00 representing filing fees.

Please file with your office and return evidence to my attention at the letterhead address.

If you have any questions, please contact me on our toll-free line at 800-934-2556, prior to returning the documents.

Thank you.

Sincerely,

Laura L. Lightholder

enclosure

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

	provisions of sections 60		•	•		
-	ange is submitted for a co ler to change its registered	-	•	•		
1 The name of	the componion		Deforest Enterori	ses Inc		
	1. The name of the corporation: Deforest Enterprises, Inc. 2. The principal office address: 8679 Freeway Drive, Macedonia, OH 44056					
z. The principa	of office address.	<u> </u>				
3. The mailing	address (if different):					
) OF	***			
	rporation/qualification:					
	d street address of the cur artment of State:	rrent registered ag	ent and registered offic	e on file with the	:	
	HL Statutory Ag	gent, Inc.			7A S	
3301 Bonita Beach Road, Suite 308				06 NOV		
	Bonita Springs,	FL 34134			IAR IAR	
6. The name an (if changed):	d street address of the nev	w registered agent	(if changed) and /or re	egistered office	MO 21	
	NRAI Services,	Inc.			20 ATE RIDA	
	2731 Executive		Suite 4			
	Weston, FL 3	. Box NOT acceptable)				
The street addr as changed wil	ress of its registered officil be identical.	ce and the street a	ddress of the business	s office of its reg	istered agent,	
Such change wauthorized by	vas authorized by resolut the board, or the corpora	ion duly adopted tion has been not	by its board of directorified in writing of the	ors or by an offic change.	eer so	
	ture of an officer or director)		EDWARD	J KUBEK		
Ç., .,	t the appointment as reg	istered agent and		yped name and title)	TREASURER	
I further agree of my duties, a document is be	to comply with the prov nd I am familiar with an sing filed merely to reflec is been notified in writin	isions of all statu d accept the oblis ct a change in the	legree to uct in this consistency and the properties of my position of registered office additional and the properties of the properties o	per and complete as registered age ress, I hereby co.	e performance ent. Or, if this nfirm that the	
day	ignature of Registered Agent)	/m	November	9 2006		
LAURATE C	inature of Resistered Agent) TOUTHOUSE, ASS chalf of an entity:	; r. Sec.	(Date)		
	vices, Inc.					
	(Typed or Printed Name)					

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