P08000014740

(Requestor's Name)					
(Address)					
(Address)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
TORON WAN MALE					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Solution depicts					
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Special Instructions to Filing Officer:					
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2009 SEP -2 AM 8: 51
SECRETARY OF STATE

R.A.

SEP - 4 200



400 N: ASHLEY DRIVE, SUITE 1500 TAMPA, FL 33602 TELEPHONE (813) 229-9119 FACSIMILE (813) 229-3415

August 31, 2009

Florida Department of State Division of Corporations P. O. Box. 6327 Tallahassee, FL 32314

Re: Yontz Enterprises, Inc.

Dear Sir:

Enclosed for filing please find the original and one copy of the Statement of Change of Registered Office or Registered Agent or Both for Corporations for Yontz Enterprises, Inc. Also enclosed please find a check in the amount of \$35.00, payable to the Department of State for the filing fee.

Please acknowledge receipt of the enclosed original by date stamping the enclosed photocopy of the same and returning it to my office in the enclosed, self-addressed, stamped envelope.

If you have any questions regarding this matter, please contact my office.

Very truly yours,

John P. Holsonback

JPH/slb Enclosures

cc: Andrew and Michael Yontz

Jph/yontz/state.001

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

	provisions of sections 607.0502, 617 inge is submitted for a corporation o				
	rnge is suomittea for a corporation o r to change its registered office or r				
1. The name of	the commencion. Youtz Enter	prises Inc.			
	and corporation.	19th Avenue, Newber	rv. Florida 32669		
2. The principal	office address: 23242 8111	27th Arenae, Hense.	,, 1101130 0-00		
3. The mailing a	ddress (if different): Fuller Ho	lsonback, 400 North	Ashley Drive, Suit		
J	Florida 33602				
	poration/qualification: 02/08/	2008 Document number	P08000014740	•	
	d street address of the current register tment of State: (If resigned, enter re	•	ce on file with the		
	Corporate Creations Net	work, Inc.			
	11380 Prosperity Farms Road #221E				
	Palm Beach Gardens, FL	33410	ZOUS SECRETARY S	T	
6. The name and (if changed):	d street address of the new registered	l agent (if changed) and /or re	س لها 	1 1	
	John P. Holsonback, Esq	uire, Fuller Holson	back FS	20 20 25	
	400 North Ashley Drive, Suite 1500				
	Tampa, FL 33602	ox NOT acceptable	्या 		
The street address changed will	ess of its registered office and the s be identical.	treet address of the business	s office of its registered ag	ent,	
Such change was authorized by the	as authorized by resolution duly ad ne board, or the corporation has be	lopted by its board of direct en notified in writing of the	ors or by an officer so change.		
M. Y. Signatu	of an officer or director	Mike Youtz Printed or ty	ped name and title		
I further agree of my duties, an document is be	the appointment as registered age to comply with the provisions of al ad I am familiar with and accept th ing filed merely to reflect a change s been notified in writing of this ch	l statutes relative to the pro e obligation of my position in the registered office add	apacity. per and complete perform as registered agent. Or, ij ress, I hereby confirm tha	ance f this t the	
	74	August 31, 20	09		
Sig	nature of Registered Agent		Date		
If signing on be	half of an entity:				
John P. Ho					
т	yped or Printed Name				

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