

PO9000014782

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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D. CONNELL APR 28 2010



LAW OFFICES OF RICHARD S. AGSTER, P.A.

3602 WEST EUCLID AVENUE

TAMPA, FLORIDA 33629

(S.W. CORNER AT HIMES)

TELEPHONE

(813) 832-3939

April 20, 2010

FACSIMILE

(813) 832-3841

Dept. of State
Division of Corporations
Amendment Section
P.O. Box 6327
Tallahassee, FL 32314

Certified Mail #: 7009 2820 0001 9314 9593

RE: THE ENDZONE BAR AND GRILL, INC.,
YOUR DOCUMENT NO. P09000014782

Dear Sir:

Enclosed please find the Resignation of the current officers and directors for the Endzone Bar and Grill, Inc., your document number P09000014782, along with the Resignation of Mr. Schuver as Resident Agent.

Additionally, you will find the Statement of Change of Registered Officers and Registered Agents for the corporation, appointing Mr. Gary Brown as the new Registered Agent.

I am enclosing my Trust check in the amount of \$192.50 to cover the cost of these changes. If you should need any additional documentation or information, please feel free to contact me.

Very Truly Yours,

Richard Scott Agster
RSA/dta
Enclosures

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

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: THE ENDZONE BAR AND GRILL INC.
2. The principal office address: 6243 South Dale Mabry Highway, Tampa, FL 33616
3. The mailing address (if different): 502 South Fremont Ave., Apt 1226
Tampa, FL 33606
4. Date of incorporation/qualification: 02-16-2009 Document number: PO 9000014782
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

G. JUSTIN SCHUVER (Resigned)

502 South Fremont Ave.

Tampa, FL 33606

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

GARY BROWN

6811 South Elemeta Street

P.O. Box NOT acceptable

Tampa, FL 33616

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

MONICAY BROWN, President
Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.


Signature of Registered Agent

4-12-10
Date

If signing on behalf of an entity:

Typed or Printed Name

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

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