

Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H07000302668 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name

: C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone

: (850)222-1092

Fax Number

: (850)878-5926

REGISTERED AGENT CHANGE

PJ FOOD SERVICE, INC.

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$35.00

Electronic Filing Menu

Corporate Filing Menu

CT CORP

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

8205551972

DEC-18-2007 15:43

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

statement of cha	mge is submitted for a corporation org	1502, 607,1508, or 617,1508, Florida Sta vanized under the laws of the State of <u>K</u> i istered agent, or both, in the State of Flo	entucky
	the corporation: PJ Food Service, Inc.	stereu agent, or both, in the sittle of the	ų 1444.
		OULBVARD LOUISVILLE, KY 40299	
3. The mailing a	address (if different):		
4. Date of incom	poration/qualification: 1/25/1993	Document number: F9300000	514
	d street address of the current registered chront of State:	d agent and registered office on file with	the .
	Corporation Service Company		
	1201 Hays Street		
	Tallahassee, FL 32301		
6. The name and (if changed):	d street address of the new registered a	gent (if changed) and /or registered offic	雅 - 三
	C T Corpor	istion System	S P P
		, 1200 South Pine Island Road	FED REST
	(P.O. Box NOT accepts	ble) Florida 33324	3
		et address of the business office of its	
Such change with authorized by the	as authorized by resolution duly adop ne board, or the corporation has been	and by its board of directors or by an o notified in writing of the change.	fficer so
Span Constitution of the Spanish	in or an official phairector)	Stacin Taylor was with the sine sine	UP
I hereby accept I further agree to finy duties, an document is her borporation has	the appointment as registered agent to comply with the provisions of all st d I am familiar with and accept the o ing filed merely to reflect a change in theen notified in writing of this chan, C T Corporation System	ond agree to act in this capacity, tatutes relative to the proper and comp bilgation of my position as registered the registered office address, I hereby ge.	lete performance agen. Or, if this confirm that the
By: GA	are learned	12-18-07	
If signing on be	half of an entity:	(Date)	
Carol Record, As			
Ć1	'yeard or Printed Name)	FEE: \$35.00 * * *	
M/ CR2E045 (8/05)	MAKE CHECKS PAYABLE TO F	Lorida Department of State P.O. Box 6327, Tallahassee, PL 32	314
FLADA - 04/14/2001 C T Syd	man Quilips		

TOTAL P.83 12/19/2007 12:34

920222763