

SUITE 305 • RIVIERA PROFESSIONAL BUILDING 4675 PONCE DE LEON BOULEVARD CORAL GABLES, FLORIDA 33146

TELEPHONE (305) 667-7571 FACSIMILE (305) 667-0206

35.00

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August 28, 2000

Florida Department of State Division of Corporations Post Office Box 6327 Tallahassee, Florida 32314

RE: Scotty's Grocery, Inc.

Dear Sirs:

Enclosed find for filing with the Division of Corporations, Scotty's Grocery, Inc.'s Statement of Change of Registered Office or Registered Agent Both for Corporations along with my trust account check in the amount of \$35.00 representing your fee for same.

Sincerely,

Louis Stinson, Jr.

LS/mr Enclosure





· 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, the undersigned corporation organized under the laws of the State of <u>Florida</u> submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation : _____ Scotty's Grocery, Inc.

2. The mailing address of the corporation : c/o Louis Stinson, Jr., Esq.

4675 Ponce de Leon Blvd., Suite 305, Coral Gables, FL 33146

3. Date of incorporation/qualification: <u>May 7, 1975</u> Document number:

4. The name and address of the current registered agent and registered office:

McDaniel, Elizabeth G. (deceased)

_____3117 Bird Avenue

Miami, Florida 33133

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

Louis Stinson, Jr.

4675 Ponce de Leon Blvd., Suite 305

Coral Gables, Florida 33146

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.

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(Signature of an officer,)chairman or vice chairman of the board)

(Date)

\$30B

Claudette Carey, President

(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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

(Signature of Registered Agent)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

(Date)

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

CR2E045(8/99)

DIVISION OF CORPORATIONS

P.O. Box 6327