0830



ACCOUNT NO.

072100000032

REFERENCE :

627331

4338223

AUTHORIZATION

COST LIMIT \$ 35.00

ORDER DATE: June 18, 2002

ORDER TIME : 2:23 PM

ORDER NO. : 627331-685

CUSTOMER NO: 4338223

CUSTOMER: Ms. Julie Backe Albertson's, Inc.

250 Parkcenter Blvd.

Po Box 20

Boise,, ID 83706

CHANGE OF AGENT

NAME: JEWEL FOOD STORES, INC.

900006882439--1

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CONTACT PERSON: Carla Lohi

C. Coulliste AUG 0 2 2002

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

he undersigned corporation organized under the laws of the State of New York	
ubmits the following statement in order to change its registered office or registered agent, or both, in	-
he State of Florida.	
. The name of the corporation :	
JEWEL FOOD STORES, INC.	
. The mailing address of the corporation: 250 Parkcenter Blvd PO Box 20	
Boise, ID 83726	
. Date of incorporation/qualification: March 28, 1916 Document number: 800830	
. The name and address of the current registered agent and office:	
CT Corporation System	-
1200 South Pine Island Road	
Plantation, FL 33324	
. The name and address of the new registered agent (if changed) and/or registered office (if changed): (P. O. Box Not Acceptable)	. '
Corporation Service Company	<u>-</u>
1201 Hays Street	
Tallahassee, FL 32301	
he street address of its registered office and the street address of the business office of its registered gent, as changed, will be identical.	
uch change was authorized by resolution duly adopted by its board of directors or by an officer so uthorized by the board.	
Du a P D 2 7/31/02	
(Signature of an officer, chairman or vice chairman of the board) (Date)	
ura R. Dunlap, Attorney in Fact	
(Printed or typed name and title)	#FF:
laving been named as registered agent and to accept service of process for the above stated orporation, I hereby accept the appointment as registered agent and agree to act in this capacity. further agree to comply with the provisions of all statutes relative to the proper and complete erformance of my duties, and I am familiar with and accept the obligation of my position as egistered agent.	
orporation Service Company () & Link of A) Skipply () & Link of A) Skipply	
(Signature of Registered Agent) (Date)	
signing on behalf of an entity: Deborah D. Skipper Asst. V. Pres.	
(Typed or Printed Name) (Capacity)	-4
* * * FILING FEE: \$35.00 * * *	

P.O. Box 6327

TALLAHASSEE, FL 32314

CR2E045(9/00)

DIVISION OF CORPORATIONS