Ricky Soto NRAI850-224-1649

Division of Corporations

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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H110001444243ABCV

Division of Corporations
Fax Number: (850) 617-6380

Account Name: CORPDIRECT AGENTS, INC.
Account Number: 110450000714
Phone: (850) 222-1173

: (850)224-1640

**Enter the email address for this business entity to be used for future

Fax Number

annual report mailings. Enter only one email address please.

REGISTERED AGENT CHANGE UNITED STATES COLD STORAGE, INC.

Certificate of Status	0
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CR2E045 (8/05)

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

statement of cha	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, t ange is submitted for a corporation organized under the laws of the State of New Je er to change its registered office or registered agent, or both, in the State of Florida.	his rsey		
1. The name of the corporation: UNITED STATES COLD STORAGE, INC.				
2. The principal	office address: 201 LAUREL RD, STE 400, FOUR ECHELON PLAZA ES, NJ 08043			_
3. The mailing a	address (if different);			<u> </u>
4. Date of incorp	peration/qualification: May 28, 1971 Document number: 8262	257 🚉	=	
5. The name and	d street address of the current registered agent and registered office on file with the irtment of State: (If resigned, enter resigned)	MASSE!	UN -2	_=
	CT Corporation System	門碑	P	ĹΠ
	1200 South Pine Island Road		Ö.	U
	Plantation, Florida 33324	LORIDA	55	
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office	4		
	National Corporate Research, Ltd., Inc.			
	515 East Park Avenue			
	P.O. Box NOT sexceptable			
	Tallahassee, Florida 32301			
The street address changed will	ess of its registered office and the street address of the business office of its registe I be identical.	red agen	ι,	
Such change was	as authorized by resolution duly adopted by its board of directors or by an officer the board, or the corporation has been notified in writing of the change.	50		
142	BARRY On it they Controlled who as no little and little		rence	الملو
l hereby accept I further agree of my dulies, ar document is be corporation ha	of the appointment as registered agent and agree to act in this capacity. It is comply with the provisions of all statutes relative to the proper and complete per and complete per and lamiliar with and accept the obligation of my position as registered agent. It is a few to reflect a change in the registered office address, I hereby confirms been notified in writing of this change.	erformane Or, if the m that th	ce is ie	
/50	gradure of Regulated Agent Date		•	
If signing on bo	chalf of an entity:			
Lucy Dav	wson, Assistant Secretary			
T	Typed or Printed Name			
	* * * FILING FEE: \$35.00 * * *			
	MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE			

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