

ACCOUNT NO. :

072100000032

REFERENCE

AUTHORIZATION

COST LIMIT

\$ 35.00

ORDER DATE : January 14, 1998

ORDER TIME : 11:06 AM

ORDER NO. : 668867-550

CUSTOMER NO: 4340329

400002404214--1

CUSTOMER: Ms. Faith E. Harrison Jp Food Service, Inc.

9830 Patuxent Woods Drv.

P.o. Box 2652

Columbia, MD 21046

CHANGE OF AGENT

NAME: JOHN SEXTON & CO.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

\_\_\_ PLAIN STAMPED COPY

CONTACT PERSON: Brenda Phillips

## Florida Department of State, Sandra B. Mortham, Secretary of State

## \* \* \* FILING FEÉ: \$35.00 \* \* \*

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

Pursuant to the provuindersigned corporate	isions of sections 607.0502 tion organized under the lav	. 617.0502, 607.1508, or 617.15 vs of the State of DELAWARE	08, Florida Statutes, the
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 co	rporation is: JOHN SEXTON	& CO.	
2. The mailing addres	s of the corporation is: 613	BALTIMORE DR., WILKES BARR	E, PA 18702
3. Date of incorporation	on/qualification: 8/11/81	Document numbe	r: 850013
4. The name and addre	ess of the current registered	agent and office:	For 9
CT CC	RPORATION SYSTEM		
1200	S. PINE ISLAND RD.		20 1
	ATION, FL 33324 ess of the new registered age	ent and office: (P. O. Box Not Ac	ceptables 2:
Corpo	ration Service Company		5 5
	Hays Street		<b></b>
	nassee, FL 32301		
agent, as changed, wi	its registered office and the libe identical.	e street address of the business	office gis registered
Such change was auth authorized by the boa	norized by resolution duly rd.	adopted by its board of director	s or by an officer so
(Signature of an off	cer, chairman or vice chairman of		(Date)
David M. A	Abramson- Vic	e President 1	2/23/97
· · · · · · · · · · · · · · · · · · ·	Printed or typed name and sistes	ccept service of process for the registered agent and agree to c ill statutes relative to the prope i and accept the obligation of m	(Date) above stated act in this capacity. r and complete ny position as
Vali	Helruber	aust U.P.	116/98
	of Registered Agent)	(Date)	
<b>f signing on behalf of an e</b> VICKI SCHREIBER	nuty;		
	Printed Name)	ASST. VICE PRESI	· · · · · · · · · · · · · · · · · · ·

CR2E045(3/96)

(Capacity)