

F02000000750

SUPERIOR

INFORMATION SERVICES, LLC

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
02 MAR 22 PM 12:45

P.O. Box 8787
Trenton, NJ 08650-0787
800-848-0489
Fax 609-883-7891
www.superiorinfo.com

Date: March 18, 2002

To: Florida Secretary of State

From: Corporate Services Department

Re: 1. SWEET DREAMS ICE CREAM, INC.
Change of Registered Agent and Registered Office

600005146596--5
-03/22/02--01053--004
*****35.00 *****35.00

Enclosed herewith please find the necessary document to Change the Registered Agent and Registered Office for the above referenced in your state. Also attached is a check in the amount of \$35.00 necessary to cover the filing fees.

Please file upon receipt, returning the customary evidence to my attention in the self-addressed, stamped envelope enclosed for your convenience.

If there are any problems with the enclosed please contact any of the following:

April Brady, Corporate Services Manager – (800) 848-0489, ext. 5444
Ruth Talavera, Client Services Specialist – (800) 848-0489, ext. 5407
Almeda Nangel, Client Services Specialist - (800) 848-0489, ext. 5400

Thank you for your assistance in this matter.

RA Chg.

V SHEPARD MAR 28 2002

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 Georgia submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

FILED STATE
SECRETARY OF CORPORATIONS
02 MAR 22 PM 12:45

1. The name of the corporation : Sweet Dreams Ice Cream, Inc.

2. The mailing address of the corporation : 620 Falls Lake Drive
Alpharetta, GA 30022

3. Date of incorporation/qualification: 2/12/02 Document number: F02000000750

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

Paralegal & Attorney Service Bureau, inc.

1406 Hayes Street, Suite 2

Tallahassee, FL 32301

5. The name and address of the new registered agent (if changed) and/or registered office (if changed):
(P. O. Box Not Acceptable)

NRAI Services, Inc.

526 E. Park Avenue

Tallahassee, FL 32301

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.

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

3/4/02
(Date)

Barry Gold, 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 registered agent.

NRAI Services, Inc.

B. April Brady
(Signature of Registered Agent)

2/15/02

(Date)

If signing on behalf of an entity:

B. April Brady, Asst. Secretary

(Typed or Printed Name)

(Capacity)

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