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(Requ	estor's Name)	
(Address)		
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(City/s	State/Zip/Phone	; #)
PICK-UP	MAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates	of Status
Special Instructions to Fi	ling Officer:	
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SECHETARY OF STATALLAHASSEE, FLOR

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: Boon Edam Tomsed, Inc. (Name of corporation)		
DOCUMENT NUMBER: 112575784		
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.		
Please return all correspondence concerning this matter to the following:		
Jessica Lappin		
(Name of person)		
Bay State Corporate Services, Inc.		
(Name of firm/company)		
6 Beacon Street, Suite 510 (Address)		
Boston, MA 02108		
(City/state and zip code)		
For further information concerning this matter, please call:		
Jessica Lappin at (617) 742-8484 (Name of person) (Area code & daytime telephone number)		
(Name of person) (Area code & daytime telephone number)		
Enclosed is a \$35.00 check made payable to the Department of State.		
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399		

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

_	rovisions of sections 607.0502, 617.0502, 607 ted for a corporation organized under the laws	508, or 617.1508, Florida Statutes, this statement of of the State of New York
-	stered office or registered agent, or both, in the	•
1. The name of th	ne corporation: Boon Edam Tomsed Inc.	
2. The principal of	office address: 420 McKinney Parkway, Lilli	ngton, NC 27546
3. The mailing ad	ldress (if different):	
4. Date of incorpo	oration/qualification: 7/1/2005	ocument number: <u>112575784</u>
5. The name and Florida Depart	street address of the current registered agent an ment of State:	I registered office on file with the
	Corporation Service Company	
	1201 Hays Street	
_	Tallahassee, FL 32301-2525	
6. The name and (if changed):	street address of the new registered agent (if ch	anged) and /or registered office
	NRAI Services, Inc.	
	2731 Executive Park Drive, Suite 4	· · · · · · · · · · · · · · · · · · ·
	(P.O. Box or personal mailbox N	OT acceptable)
-	Weston, FL 33331	
The street address changed will be	ss of its registered office and the street addres identical.	s of the business office of its registered agent, as
Such change was	s authorized by resolution duly adopted by its corporation has been notified in writing of th	board of directors or by an officer so authorized by e change.
(Si	gnature of an officer or director)	Via Passer and Cattley
I hereby accept to I further agree to auties, and I am being filed merel been notified in NRA Services, by:	the appointment as registered agent and agree to comply with the provisions of all statutes reformiliar with and accept the obligation of my to reflect a change in the registered office a writing of this change. Signatule of Registered Agent)	to act in this capacity, ative to the proper and complete performance of my position as registered agent. Or, if this document is ddress, I hereby confirm that the corporation has
Jessica Lappin		Assistant Secretary
(Typed or Printed Name)		(Capacity)

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