## F0500005172

(Re	equestor's Name)			
(Ad	ldress)			
(Ad	(dress)	<del></del>		
(Ći	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				
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Ps 4/18/00



National Registered Agents, Inc. 10985 Cody Street Suite 210 Overland Park, KS 66210 800.550.6724 Fax 913.851.0713

## National Registered Agents, Inc.

... "NRAI, the best choice for statutory representation"

April 5, 2006

Florida Department of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

RE: Fresh Unlimited, Inc. Florida Change of Agent

Dear Sir/Madam,

For the purposes of changing the registered agent and registered office of the above captioned Fresh Unlimited, Inc., enclosed herewith in duplicate, is a Statement of Change of Registered Office or Registered Agent form accompanied by our check in the amount of \$35.00.

Please proceed with the filing of the enclosed, returning official receipts and evidence in the enclosed Business Reply Envelope.

Thank you in advance for your cooperation in this matter.

Very truly yours,

Christian Eubanks

Enclosure - Check

## **COVER LETTER**

Amendment Section Division of Corporations

SUBJECT:	Fresh Unlimited, Inc. (Name of Corporation)	
	(Name of Corporation)	
DOCUMENT NUMBER:	F05000005172	
The enclosed Statement of Chang	e of Registered Office/Agent and fee are submitted for filing.	
Please return all correspondence of	oncerning this matter to the following:	
•	, , , , , , , , , , , , , , , , , , ,	
	Christian Eubanks	
<del></del>	(Name of Contact Person)	
Na	itional Registered Agents, Inc.	
	(Firm/Company)	
	10985 Cody Street, Suite 210 (Address)	
	(Address)	
	Overland Park, KS 66212	
	(City/State and Zip Code)	
For further information concerning	g this matter, please call:	
Christian Eub		L a -\
(Name of Contact	Person) (Area Code & Daytime Telephone Num	noer)
Enclosed is a \$35.00 check made	payable to the Department of State.	
<u>Mailing</u> Amendr	Address: Street Address: nent Section Amendment Section	

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations

Tallahassee, FL 32301

2661 Executive Center Circle

Clifton Building

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

Pursuant to the provisions of sections 60 statement of change is submitted for a co in order to change its registere	orporation organize	ed under the laws of the State	e of	
	-	-	DBA FLOSHWAY FOORS, I	
2. The principal office address:	e address: 601 N. Stolle Avenue, Sidney, OH 45365			
3. The mailing address (if different):				
Date of incorporation/qualification:	08/31/2005	Document number:	F05000005172	
5. The name and street address of the cu Florida Department of State:	rrent registered age	ent and registered office on fi	le with the OF APR 11	
	Hank Pie	erro	A CONTRACTOR	
23	01 Lake Mar	y Blvd. E.		
	2301 Lake Mary Blvd. E.  Sanford, FL 32773			
	Services, I	∑a<.		
	EXECUTIVE Pari	k Drive, Suite 4		
<u></u>	Weston, FL	33331		
The street address of its registered offi as changed will be identical.	ce and the street a	ddress of the business office	e of its registered agent,	
Such change was authorized by resolunthorized by the board, or the corporation	tion duly adopted lation has been noti	by its board of directors or lifted in writing of the chang	,	
(Signature of an officer or director)		Printed or type in nar	ne and title)	
I hereby accept the appointment as rej I further agree to comply with the pro of my duties, and I am familiar with a document is being filed merely to refle corporation has been notified in writin NKAI Sectory LC.	gistered agent and visions of all statu nd accept the oblig ect a change in the ng of this change.	agree to act in this capacit tes relative to the proper an cation of my position as reg registered office address, I	y. d complete performance istered agent. Or, if this hereby confirm that the	
8): Christ Harmonia (Signature of Registered Agent)	<u></u>	Agr: 1 6, 2006 (Date)		
If signing on behalf of an entity:				
Christian Eubanks - Asst. Se (Typed or Printed Name)	cretary			
•	* * * FILING FEI	E: \$35.00 * * *		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314