## F0700000059

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
<u> </u>						

Office Use Only



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2018 MAY 22 PM 1: 20
SECRETARY OF STATE

C. GOLDEN
MAY 2 3 2018



CSC - WILMINGTON 251 Little Falls Drive Wilmington De 19808

800-927-9800 302-636-5454 FAX

REGISTRATION SECTION DIVISION OF CORPORATIONS To:

From: Mary Rivers mary.rivers@cscglobal.com

Date: May 18, 2018

Order#: 217176-006

Re: BRUEGGER'S ENTERPRISES, INC.

Enclosed please find:

Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

File in your office on a routine basis. XX

XX\_\_\_\_ Issue Proof of Filing.

Please return evidence to the following:

Attn: Mary Rivers

c/o Corporation Service Company

251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

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

statement of cha	provisions of sections 607.0502, 61 nge is submitted for a corporation o r to change its registered office or r	organized under the la	nvs of the State of	f DE	_	
1. The name of t	he corporation: BRUEGGER'S EN	TERPRISES, INC.			-	
2. The principal	office address: 3900 Lakebreeze A	ve. N., Minneapolis, M	MN 55429			
3. The mailing a	ddress (if different): 555 Zang St. 5	Suite 300, Lakewood,	CO 80228			
4. Date of incorp	poration/qualification: 12/28/2006	Document	number: F0700	10000059		
5. The name and Florida Depar	I street address of the current registerment of State: (If resigned, enter re	ered agent and register esigned)	red office on file	with the		
	C T CORPORATION SYSTEM			2018 TALL		
	1200 SOUTH PINE ISLAND ROA	D		MAY 22 CRETAR) LAHASSI	7	
	PLANTATION	FL	33324	<del>[Π</del> /		
6. The name and (if changed):	I street address of the new registere	d agent (if changed) as	nd /or registered (	PM 1: 20 OF STATE E. FLORID		
	Corporation Service Company			- Om 9		
1201 Hays Street P.O. Box NOT acceptable						
	Tallahassee	FL	32301	<del></del>		
The street address changed will	ess of its registered office and the s be identical.	street address of the b	usiness office of	its registered ag	gent,	
	as authorized by resolution duly ad the board, or the corporation has be					
	Confly -	Michael W. Da	avis, Secretary			
_	ue of an officer or director		ites or typed name and	utic		
I further agree performance of agent. Or, if the hereby confirm	the appointment as registered age to comply with the provisions of all my duties, and I am familiar with is document is being filed merely that the corporation has been not on Service Company	it statutes relative to t and accept the obliga o reflect a change in ified in writing of this	the proper una co tion of my positi the registered off	on as regisierea	ľ	
BY: A A	mature of Registered Agent	05/17/2018	Date			
If signing on be	chalf of an entity:					
	, Assistant Vice President					
'	There or i i misse i mine					

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