## F08000004398

(Requestor's Name)				
(Address)				
(Address)				
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
		·		

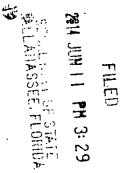
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6/24/14



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Morgan Kennedy

Date: June 9, 2014

Order#: 150695-254

Re: SYSCO NORTH CENTRAL FLORIDA, INC.

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$35.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Morgan Kennedy c/o Corporation Service Company 2711 Centerville Road, Suite 400 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 607.0302, 617. inge is submitted for a corporation or r to change its registered office or re	ganized under the la	aws of the State of DE	
1. The name of t	the corporation: SYSCO NORTH CE	NTRAL FLORIDA, II	NC.	
	•			
•	AVE PAKWAY, HOUSTON, TX 7707			
3. The mailing a	ddress (if different):			
4. Date of incorp	poration/qualification: 10/07/2008	Document	number: F08000004398	
	I street address of the current registerement of State: (If resigned, enter res			
	CAPITOL CORPORATE SERVICES, INC.			
	155 OFFICE PLAZA DRIVE			
	TALLAHASSEE	FL	32301	
Florida Department of State: (If resigned, enter resigned)  CAPITOL CORPORATE SERVICES, INC.  155 OFFICE PLAZA DRIVE  TALLAHASSEE  FL 32301  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):				
	Corporation Service Company			
	1201 Hays Street			
	P.O. Box NOT acceptable  Tallahassee FL 32301		32301	
	- I alianassee		J2301	
			usiness office of its registered agent,	
Such change wa authorized by th	as authorized by resolution duly adorne board, or the corporation has been	oted by its board of a notified in writing	directors or by an officer so of the change.	
	36		/ICE PRESIDENT	
Signature of an officer or director Printed or typed name and title				
I further agree is performance of agent. Or, if the hereby confirm	the appointment as registered agent to comply with the provisions of all simy duties, and I am familiar with an is document is being filed merely to that the corporation has been notifien Service Company	statutes relative to the ad accept the obligat reflect a change in the	he proper and complete tion of my position as registered he registered office address, I	
By: Drace Cotubile 05/23/2014				
Sigi	nature of Registered Agent		Date	
If signing on be	half of an entity:			
Grace E. Kirby,	ASST. VICE PRESIDENT			
T	pped or Printed Name			

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