

# 2008 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# F41517

**FILED**  
**Jun 27, 2008**  
**Secretary of State**

**Entity Name:** PATTERSON SCALE AND RESTAURANT EQUIPMENT COMPANY

**Current Principal Place of Business:**

2201 EDISON AVENUE  
JACKSONVILLE, FL 32204

**New Principal Place of Business:**

**Current Mailing Address:**

1310 EDISON AVENUE  
JACKSONVILLE, FL 32204

**New Mailing Address:**

2201 EDISON AVENUE  
JACKSONVILLE, FL 32204

FEI Number: 59-2121383

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GLOCKER, T. WILLIAM  
ONE INDEPENDENT DRIVE  
SUITE 3000  
JACKSONVILLE, FL 32202 US

**Name and Address of New Registered Agent:**

TRIGLIA, ROBERT B  
2201 EDISON AVENUE  
JACKSONVILLE, FL 32204 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ROBERT B. TRIGLIA

06/27/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PST ( ) Delete  
Name: TRIGLIA, ROBERT B  
Address: 1310 EDISON AVENUE  
City-St-Zip: JACKSONVILLE, FL 32204

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PST (X) Change ( ) Addition  
Name: TRIGLIA, ROBERT B  
Address: 2201 EDISON AVENUE  
City-St-Zip: JACKSONVILLE, FL 32204

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERT B. TRIGLIA

PRES

06/27/2008

Electronic Signature of Signing Officer or Director

Date