

ACCOUNT NO.

: 072100000032

REFERENCE

234629

4353856

AUTHORIZATION

COST LIMIT

\$ 35.00

ORDER DATE: May 10, 1999

ORDER TIME :

10:39 AM

ORDER NO.

234629-085

800002873748--6

CUSTOMER NO:

4353856

CUSTOMER: Ms. Karissa Harkin

> Conagra, Inc. One Conagra Drive Millstop Cc241

Omaha, NE 681025001

CHANGE OF AGENT

NAME:

A.M. GILARDI & SONS, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Robert Maxwell

Florida Department of State, Sandra B. Mortham, Secretary of State

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

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

	he provisions of sections 607.0502, 617.050. corporation organized under the laws of the S		, Florida Statutes, the
	ollowing statement in order to change its regi	· · · · · · · · · · · · · · · · · · ·	l agent, or both, in th
State of Flori	da.		
1. The name	of the corporation is: A.M. Gilardi & Sons	, Inc.	
2. The mailin	g address of the corporation is: One ConAgra	Drive CC-242, Omaha,	NE 68102
3. Date of inc	corporation/qualification: 2/5/98	Document number:	F98000000702
4. The name	and address of the current registered agent an	d office:	•
			99 SE(98
	C T Corporation System		∑ ≈ = _
	1200 South Pine Island Road		ASSET I
	Plantation, FL 33324	_	SHO M
5. The name	and address of the new registered agent and o	office: (P. O. BoxNot Acc	eptable 🗸 🔁 🖸
	Corporation Service Company	-	95 49
			SS FFF
	1201 Hays Street		
	Tallahassee, FL 32301		
The street ac agent, as cha	dress of its registered office and the street anged, will be identical.	address of the business o	ffice of its registered
Such change	was authorized by resolution duly adopted y the board.	by its board of directors	or by an officer so
authorized b	y the board.		
NED	ra of Reith		29, 1999
(Signati	ure of an officer, chairman or vice chairman of the board)		(Date)
Debra L. Kei	ith, Vice President-Tax	Apri	1 29, 1999
	(Printed or typed name and title)		(Date)
corporation, I further agr	named as registered agent and to accept so I hereby accept the appointment as registed to comply with the provisions of all statu of my duties, and I am familiar with and accept.	red agent and agree to a tes relative to the proper	ct in this capacity. · and complete
	un Muhito	 May 12, 199	q
	(Signature of Registered Agent)	(Date)	<u> </u>
If signing on bo	ehalf of an entity:		
Sylvia N	1. White	Authorized R	len
	(Typed or Printed Name)	(Capaci	
CR2E045(3/96)		•	