

ACCOUNT NO. 072100000032

750739 <u>5027746</u> REFERENCE :

AUTHORIZATION

\$ 35.00 COST LIMIT :

ORDER DATE: June 29, 2000

12:29 PM ORDER TIME :

ORDER NO. : 750739-025

CUSTOMER NO: 5027746

CUSTOMER: Ms. Linda Freeman Pesl

Odwalla, Inc.

120 Stone Pine Road

Half Moon Bay, CA 94019

CHANGE OF AGENT

NAME:

FRESH SAMANTHA, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Tamara Odom

00 AUG 31 PM 1: 45

BECEINED

TOTAL OF SAIDLEST સંગામ જેટલેક્ટ રેલા કર્લા છે. મેર્લા કર્યા. ૧૫ જેટલે કરાયા કરાયત અજનાવા

600003379106--6

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

ursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes,
ne undersigned corporation organized under the laws of the State of Maine ubmits the following statement in order to change its registered office or registered agent, or both, in
he State of Florida.
. The name of the corporation is:
Fresh Samantha, Inc.
. The mailing address of the corporation is: 120 Stone Pine Road
11-16 Mana Ray 1A AUNIA
Half Moon Bay CA 94019
. Date of incorporation/qualification: June 21, 1999 Document number: F990000003195
. The name and address of the current registered agent and office:
CT Corporation System
1200 South Pine Island Road
Plantation, FL 33324
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable).
Corporation Service Company
1201 Hays Street
<u></u>
Tallahassee, FL 32301
The street address of its registered office and the street address of the business office of its registered agent, as changed, will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board.
8-25-00
(Signature of an officer, chairman or vice chairman of the board) (Date)
James Steichen CFO
(Printed or typed name and title)
Having been named as registered agent and to accept service of process for the above stated corporation, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as
registered agent. Corporation Service Company
By: (Signature of Registered Agent) (Date)
If signing on behalf of an entity:
Lori Castaneda Asst. Vice President
(Typed or Printed Name) (Capacity)
* * * FILING FEE: \$35.00 * * *

P.O. Box 6327

TALLAHASSEE, FL 32314

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DIVISION OF CORPORATIONS