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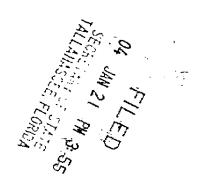
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OF JW 21 FW D: 41





ACCOUNT NO. : 072100000032

REFERENCE : 397197

5167843

COST LIMIT : \$ 25.00

AUTHORIZATION :

ORDER DATE: January 15, 2004

ORDER TIME: 10:27 AM

ORDER NO. : 397197-115

CUSTOMER NO: 5167843

CUSTOMER: Ms. Stephanie Tillman

Flowers Foods, Inc. 1919 Flowers Circle

Thomasville, GA 31757

CHANGE OF AGENT

NAME: FLOWERS BAKING CO. OF

MIAMI, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Carla E. Lohi -- EXT# 2932

EXAMINER:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1 Ti	d linkiliter nomenomeria	. PI.OWERS B	א א א א מאר אמ בייט	IAMI, LLC	
1. The name of the limite	a madinty company is:	I DOWERS D	ARTING CO. OL II	P. C.	
2. The mailing address of	the limited liability co	ompany is: _		F8 = 1	
1919 Flowers Circl	e, Thomasville, GA	A 31757		10000000000000000000000000000000000000	<u>-</u>
				Page D	
December 27, 2000		•	L000000016203	77 3	
3. Date of filing/registration	on in Florida		4. Document nur	nber Ser S	
5. The name of the register Florida Department of	red agent and the regis	stered office a	address as shown		·.
	CT Corr	poration Sy	stem		- 100
		Name			
	1200 South	n Pine Isla	nd Road		
		Address			
			3324		
	City	, State and Zi	p		
6. The name and address	of the new registered a	igent and/or o	ffice:		
	Corporatio	n Service C	Company		
		Name	•		
	1201	Hays Street			
	Florida street addres	ss (P.O. Box I	NOT acceptable)		
	Tallahassee	FL	32301		. , :
	City, S	State and Zip			
If the limited liability com confirmed that after the cl and the business office of liability company, it is her the members of the limite the operating agreement of the limite of a member or author (Signature of a member or author Blanca Lozada, Attornament of the limite of the operating agreement of the limite of the lim	nange or changes are neithe registered agent wereby confirmed that the diability company or of the limited liability of the	nade, the Flor rill be identica e change(s) w as otherwise company.	ida street address al. Or, in the case as/were authorize	of the registered off of a Florida limited d by an affirmative	vote of
(Printed or typed name of signee)					
I hereby accept the apportunity with the provision and I am familiar with an Chapter 608, F.S. Or, if address, I hereby confirm	ntment as registered a s of all statutes relativ d accept the obligation his document is being that the limited liabili	igent and agr ve to the propins of my posit filed to mere ity company h	ee to act in this ca er and complete p tion as registered ly reflect a change as been notified i	pacity. I further ag erformance of my di agent as provided fo in the registered of n writing of this cha	ree to uties, or in fice nge.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

(Signature of Registered Agent) (Sylvia Queppet, Asst. Vice President