2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L02000007192

Entity Name: SPRING HILL FOODS OF FLORIDA, L.L.C.

Current Principal Place of Business:	**New Principal Place of Business:**
10400 SAN JOSE BOULEVARD, SUITE 2 JACKSONVILLE, FL 32257	3505 ST JOHNS BLUFF ROAD JACKSONVILLE, FL 32224

Current Mailing Address:	**New Mailing Address:**
P.O. BOX 600502 JACKSONVILLE, FL 32260	7905 COLEE COVE RAOD ST AUGUSTINE, FL 32092

FEI Number: 02-0583058   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired (X)

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
VANDERVER, DAVID J 213 HONEYSUCKLE WAY JACKSONVILLE, FL 32259 US	EARNEST, DONNA H 7905 COLEE COVE ROAD ST AUGUSTINE, FL 32092 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: DONNA H. EARNEST   03/03/2006
_____
                Electronic Signature of Registered Agent   Date

MANAGING MEMBERS/MANAGERS: **ADDITIONS/CHANGES:**

Title:	MGRM ( ) Delete	Title:	MGRM (X) Change ( ) Addition
Name:	EARNEST, CLYDE	Name:	EARNEST, CLYDE
Address:	558 INLET ROAD	Address:	7905 COLEE COVE ROAD
City-St-Zip:	EUFAULA, AL 36027	City-St-Zip:	ST AUGUSTINE, FL 32092

Title:	MGRM ( ) Delete	Title:	( ) Change ( ) Addition
Name:	VANDERVER, DAVID	Name:	
Address:	213 HONEYSUCKLE WAY	Address:	
City-St-Zip:	JACKSONVILLE, FL 32259	City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: CLYDE EARNEST   MGRM   03/03/2006
_____
        Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date