L99000007042

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BEN REESE VICE PRESIDENT AND GENERAL COUNSEL

February 18, 2003



Amendment Section
Division of Corporation
P.O. Box 6327
Tallahassee, FL 32314

Re: Statements of Change of Registered Office and Registered Agent

Dear Sir or Madam:

Enclosed for filing is a Statement of Change of Registered Office and Register Agent for each of the following entities:

Entity Name		Document Number	
Pasco Beverage Company	=	J34292	:
Four Seasons Processing Holdings,	L99000007038	Ų.	
Four Seasons Processing, LLC	₹.	L99000007042	,_=
SFE Citrus GP, LLC		M99000001259	
SFE Citrus Holdings, LLC	_	M99000001260	-
SFE Citrus Processor, L.P., Ltd.		B92000000064	
Pasco Recreational Properties, LLC		L99000004014	-
Suncoast Transportation Brokers, In	H73013		
Multi-Line Cans, Inc.		F80452	
Belle Harbour Gift Fruit Company		F56195	
Pasco Beverage Group, LLC	ಆಕ	M99000001257	
Pasco Transport, Inc.	_	146852	
Pasco Brands, Inc.		P98000075617	_
Fruitpack International, Inc.	-	S51233	-

Also enclosed is a check in the amount of \$430.00 payable to the Department of State for the filing fees for these Statements.

Please direct all correspondence and requests for additional information concerning these Statements to me, as Vice President, General Counsel and Secretary of each of the above identified entities, as follows:

Ben Reese
Pasco Beverage Group, LLC
P.O. Box 97
Dade City, FL 33526-0097

Email: <u>breese@vbeverages.com</u>

Thank you for your cooperation.

Respectfully submitted,

Ren Reese

Enclosures

cc: Nathaniel L. Doliner, Esq.

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. The name of the limited liability company is: 2. The mailing address of the limited liability company is: Date of filing/registration in Florida 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: 6. The name and address of the new registered agent and/or office: Florida street address (P.O. Box NOT acceptable) City, State and Zip If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. (Signature of a member or authorized representative of a member) General Coursel & Secretary 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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change. (Signature of Registered Agent)

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

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FILING FEE: \$25.00