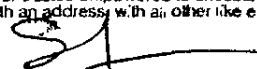


FILED

Jan 31, 2005 08:00 AM
Secretary of State

DOCUMENT # P01000035426 1. Entity Name GOOD TO GO GOURMET, INC.				Jan 31, 2005 08:00 AM Secretary of State	
Principal Place of Business 5601 CORPORATE WAY, STE 117 WEST PALM BCH, FL 33407		Mailing Address 5601 CORPORATE WAY, STE 117 WEST PALM BCH, FL 33407			
DO NOT WRITE IN THIS SPACE				01242005 No Chg-P CR2E034 (10/03)	
				4. FEI Number 65-1090008	
				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent UPSON, SEAN J 5601 CORPORATE WAY STE 117 WEST PALM BEACH, FL 33407				DO NOT WRITE IN THIS SPACE	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE: Signature (typed or printed name of registered agent and the filer) (NOTE: Registered Agent signature required when no notary)				DATE:	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS		DO NOT WRITE IN THIS SPACE			
TITLE	P				
NAME	UPSON, SEAN				
STREET ADDRESS	5601 CORPORATE WAY #117				
CITY ST ZIP	WEST PALM BEACH, FL 33407				
TITLE					
NAME					
STREET ADDRESS					
CITY ST ZIP					
TITLE					
NAME					
STREET ADDRESS					
CITY ST ZIP					
TITLE					
NAME					
STREET ADDRESS					
CITY ST ZIP					
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11; if changed, or on an attachment with an address with an other like empowered.		SIGNATURE:  1/25/05 (561) 689-1004			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					