Russell Law Offices

PROFESSIONAL ASSOCIATION ATTORNEYS AT LAW

SUITE 540

105 EAST ROBINSON STREET POST OFFICE BOX 2751

ORLANDO, FLORIDA 32802

TECHNOM - 7/122/234 Ficsh LE 407/4/45/16 August 23/2/01

800004558348--3 -08/27/01--01107--021 *****35.00 *****35.00

Secretary of State
Division of Corporations
Department of State
Post Office Box 6327
Tallahassee, Florida 32314

Re: Southeastern Restaurant Services, Inc.

Ladies/Gentlemen:

Enclosed is a Statement of Change of Registered Office and Registered Agent along with this firm's check in the amount of \$35.00 for the change.

Thank you for your service in this matter.

Sincerely,

Rodney L. Russell

Enclosure

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

| Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statute, the undersigned corporation organized under the laws of the State of Florida | |
|--|--|
| submits the following statement in order to change its registered office or registered agent, or both, i the State of Florida. | – in |
| 1. The name of the corporation is: Southeastern Restaurant Services, Inc. | _ |
| 2. The mailing address of the corporation is: 2050 Tatra Street, Oviedo, | _ |
| Florida 32791 | |
| 3. Date of incorporation/qualification: July 19, 2001 Document number: P01000071207 | - 7 |
| 4. The name and address of the current registered agent and office: | _ |
| UCC FILING & SEARCH SERVICES, INC. | |
| 526 EAST PARK AVENUE | the state of the s |
| TALLAHASSEE, FLORIDA 32301 | |
| 5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable) | |
| Kelly_Coyle | |
| , 2050 Tatra Street | |
| Oviedo, Florida 32791 | |
| 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. | |
| | |
| (Signature of an officer, chairman or vice chairman of the board) (Date) | |
| Kelly Coyle, President (Printed or typed name and title) | |
| (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 | |
| (Signature of Registered Agent) (Date) | |
| If signing on behalf of an entity: RECE A Coyce Prose Description | |
| (Typed or Printed Name) (Capacity) | |
| * * * FILING FEE: \$35.00 * * * | |
| CR2E045(7/97) | |
| Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | |

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Fax:8506816011