Division of Corporations Public Access System

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To:

Division of Corporations

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From:

Account Name : HARPER, KYNES & GELLER, P.A.

Account Number: 070651000745

: (727)799-4840 Phone

: (727)797-8206 Fax Number

## REGISTERED AGENT CHANGE

CREATIVE CUISINE FOOD SERVICE CONSULTANTS, INC.

Certificate of Status	0
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## 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 Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida
in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Creative Cuisine Food Service Consultants, Inc.
2. The principal office address: 150 Marina Plaza, Dunedin, FL 34698
3. The mailing address (if different): 150 Marina Plaza, Dunedin, FL 34698
4. Date of incorporation/qualification: 09/13/2001 Document number: P01000090967
5. The name and street address of the current registered agent and registered office on file with the  Florida Department of State: (If resigned, enter resigned)
John G. Hubbard
595 Main Street
Dunedin, FL 34698
Dunedin, FL 34698  6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
Karl H. Riedl
150 Marina Plaza
(P.O. Box NOT acceptable)  Dunedin, FL 34698
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 dub adopted by its board of directors or by an officer so authorized by the board or the corporation has been notified in writing of the change.
Karl H. Riedl, President  (Proset of the president of the
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 registered agent. Or, if this document is being flied merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
(Signature of Registered Agent) 10/27/08 (Date)
If signing on behalf of an entity:
(Typed or Printed Name)
* * * FILING FEE: \$35.00 * * *
MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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