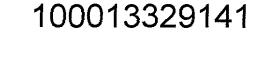
P01000116455

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to	Filing Officer:	



03/12/03--01027--002 **35.00

O3 MAR 12 PM 3: 40

Office Use Only

P3 /18 93

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations		- <u>:</u>
SUBJECT: JESTAM, TUC (Name of corporation) DOCUMENT NUMBER: PO 1000 116455	-	
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for f	iling.	<u>.</u>
Please return all correspondence concerning this matter to the following:		
STeven Stover (Name of person)	-	
ROSIE'S Key West GRILLe (Name of Arm/company)		
8604 Averecc CT	 	tan da sa
RALCIGH, N.C. 27615 (City/state and zip code)		± , <u></u> \$
For further information concerning this matter, please call:		
STeven STover at (919) 603-2046 (Area code & daytine telephone number)	-	•
Enclosed is a \$35.00 check made payable to the Department of State.		-

Street Address:
Amendment Section
Division of Corporations
409 E. Gaines Street
Tallahassee, FL 32399

CR2E045(07/02)

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

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
FLORIOF in order to change its registered office or registered agent, or both, in the State
of Florida.
1. The name of the corporation: JESTAM, JUC.
2. The principal office address: 4068 Forest HILL BLUD
WOST PALM BOACH, FL 33406
3. The mailing address (if different): 8604 AVERELL CT
RALEILH, N.C. 27615
4. Date of incorporation/qualification: 12/07/01 Document number: PD 1000 116455
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
ROBIN ROSHKIND
625 N. FLAGUER DRIVE SUITE 507
West PALM BEACH FL 33401
6. The name and street address of the new registered agent (if changed) and /or registered office (if
changed): Paul R. BEDARD E. S
113 NORTH LAKESIDE DR AFTEE &
LAKE WORTH, FL 33460 FIG 3 11
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, or the corporation has been notified in writing of the change.
STEVEN A. STOVER VICE PRESIDENT
(Signature of an officer, chairman or vice chairman of the board) (Printed or typed name and title)
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 filed merely to reflect a change in the registered office address. I hereby confirm that the corporation has been notified in writing of this change.
(taul Below = 3-7-2003
(Signature of Registered Agent) (Date)
If signing on behalf of an entity:
(Typed or Printed Name) (Capacity)

* * * FILING FEE: \$35.00 * * * *