P01871

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RA. Change

SEPP2299.2009

EXAMINER

· COVER LETTER

TO:	2: Amendment Section Division of Corporations						
SUBJI	ECT:ARNO	OLD FOODS CO (Name of Co	orporation)				
DOCU	IMENT NUMBER: P018	71					
The en	closed Statement of Chang-	e of Registered Office/	Agent and fee are submitted for filing.				
Please	return all correspondence c	concerning this matter t	to the following:				
Myra Homer (Name of Contact Person)							
(Name of Contact Person)							
Capitol Corporate Services, Inc. (Firm/Company)							
	800 Brazos, Suite 400 (Address)						
	Austin, Texas 78701 (City/State and Zip Code)						
For fu	ther information concernin	g this matter, please ca	all:				
	Myra Home (Name of Contact	er Person)	at (<u>800</u>) <u>345-4647</u> (Area Code & Daytime Telephone Number)				
Enclos	ed is a \$35.00 check made	payable to the Departm	ment of State.				
	Division P.O. Box	nent Section of Corporations	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301				

ς',

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

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statement of chang	ovisions of sections 607.0502, 617.0502, ge is submitted for a corporation organiz to change its registered office or register	zed under the laws of the .	State of DELAWARE			
1. The name of the	e corporation: ARNO	OLD FOODS COM	PANY, INC.			
2. The principal of	11	O LOUIS	DRIVE			
	HORSHAM	PA 19044				
3. The mailing add	dress (if different):					
4. Date of incorpo	oration/qualification: <u>5/3/1984</u>	Document number:	P01871			
5. The name and s Florida Departn	street address of the current registered agreement of State:	ent and registered office of	on file with the			
<u>.</u>	CT Corporation System					
	1200 S. Pine Island Road					
<u>_i</u>	Plantation, FL 33324					
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):						
	155 Office Plaza Drive, Suite A (P.O. Box NOT acceptable)					
• 	Tallahassee	Florida 32	230F2> E			
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.						
	authorized by resolution duly adopted board, or the corporation has been not					
Omde	d'arcia	Claudia V. Coscia Assistant Secretary	d name and title)			
I hanabu aaaant ti	to tan officer of director) the appointment as registered agent and a comply with the provisions of all statu I am familiar with and accept the oblig filed merely to reflect a change in the been notified in writing of this change.	Lagran to ant in this can	acity			
Dulan	ie Clase	9-21 (Dat	-09			
(Sign	ature of Registered Agent)	(Da	e)			
If signing on beh	alf of an entity:					
	Secretary on Behalf of Capitol Corporate Service ped or Printed Name)	es, Inc.	,			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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