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March 28, 2002

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

Scoops & Beans, Inc.

Dear Sir or Madam:

Re:

Enclosed please find a Statement of Change of Registered Office or Registered Agent reflecting a change in the address for the registered agent and the corporation's main office. I have also enclosed a check in the amount of \$35.00 for the filing costs.

If you have any questions regarding this matter, please do not hesitate to contact me.

Sincerely,

Robert W. Anthony

RWA/mm Enclosures

cc:

Toni Kusiak

Marget Just 1

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

	ne provisions of sections and corporation organized		·	•
•	llowing statement in ord	· ·	· —	
the State of Flo	orida.			
1. The name of	f the corporation :	Scoops & Beans,	Inc.	
2. The mailing	address of the corporati	on: 3810 Marsh	Lily Drive	
		Orlando, FL		
3. Date of inco	orporation/qualification:	Feb. 7, 2002	_ Document number: _	P02000016053
4. The name ar	nd address of the current	registered agent and o	ffice:	
	Toni Kusiak			
	3810 Marsh Lily D	rive .		
	Orlando, FL 3282	8	·	
5. The name as	nd address of the new re	gistered agent (if chang (P. O. Box Not Accepta		fice (if changed):
	3817 Blazing S	tar Drive		
	Orlando, FL 3	2828	-	
agent, as chan	ress of its registered off ged, will be identical. was authorized by resolu			-
authorized by	the board.	mon dury adopted by I	is board of directors of	by an officer so
	This lusur	(c.)=135	<u> 3-:</u>	26-2002
(Signatur	e of an officer, chairman or vice	e chairman of the board)	(Da	iej
Toni Ku	siak, President (Printed or typed name	and title		
Having been r corporation, I I further agree performance of registered age	named as registered age hereby accept the appo e to comply with the pro of my duties, and I am fo	•	ce of process for the ab agent and agree to act relative to the proper a t the obligation of my p	ove stated in this capacity. nd complete position as
registereu uge	Ji Vijo		3-26-	7002E 8
	(Signature of Registered Agent)	(Date)	APR
If signing on beh	alf of an entity:			ASS I
Toni Kusiak			President (Concoin)	- 12172 - 1242 Lile - 12
	(Typed or Printed Name)		(Capacity)	
	. **	* FILING FEE: \$35.	00 * * *	55 .
CR2E045(9/00)	DIVISION OF CORPORATIONS	P.O. Box 6327	Tallahassee, FL 32	> ω