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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : CAPITOL CORPORATE SERVICES, INC.

Account Number: 120160000048 Phone : (800)345-4647

Fax Number : (800)432-3622 S TALLENT

MAR 0 7 2018

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

REGISTERED AGENT CHANGE DIMARE FRESH, INC.

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CR2E015 (03/12)

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

statement of ch	provisions of sections 607.0502 ange is submitted for a corporat or to change its registered office	tion organized und	er the laws of the State of	FLORIDA		
1. The name of the corporation: DIMARE FRESH, INC.						
2. The principal office address: 258 NW 1st Ave., Florida City, FL 33034						
3. The mailing address (if different): 4629 Diplomacy Road, Fort Worth, TX 76155						
4. Date of incorporation/qualification: 1/21/2003 Document number: P03000010915						
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)						
	Sacher, Charles P					
2655 Lejeune Rd, Ste. 1101						
	Coral Gables	FL	33134	00		
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):						
Capitol Corporate Services, Inc.						
515 East Park Avenue 2nd Fl						
	Tallahassee	FL	32301	\$ 1 g		
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.						
Chex 12 Chery A Taylor EVA CFO						
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.						
LOUGARIE Case 3.6.18 Signature of Registered Agents Date						
If signing on behalf of an entity:						
Delante Case, Asst. Secretary on behalf of Capitol Corporate Services, Inc.						
* * * FILING PRE: \$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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