

PO3000078568

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0380

From:

Account Name : CRAIG I. KELLEY, P.A.
Account Number : I20010000039
Phone : (561) 684-5524
Fax Number : (561) 684-3773

REGISTERED AGENT CHANGE

PEAS & CARROTS CATERING, INC.

Certificate of Status	1
Certified Copy	0
Page Count	01
Estimated Charge	\$43.75

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KELLEY & FULTON PA

No. 1770 P. 2

**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: Peas & Carrots Catering, Inc.
2. The principal office address: 4521 PGA Boulevard, # 348, Palm Beach Gardens, FL 33418
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 7/17/03 Document number: P03000078568
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:

Randy S. Epstein
1025 Shady Lakes Circle
Palm Beach Gardens, FL 33418

6. The name and street address of the new registered agent (if changed) and /or registered office
(if changed):

Craig I. Kelley, Esquire
1665 Palm Beach Lakes Blvd., Suite 1000
(P.O. Box NOT acceptable)
West Palm Beach, FL 33401

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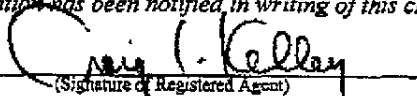
The street address of its registered office and the street address of the business office of its registered agent,
as changed will be identical.

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.


(Signature of an officer or director)

Randy S. Epstein, President
(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.


(Signature of Registered Agent)

2/28/06
(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

CRZE045 (8/03)

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