## 2007 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P03000104253

City-St-Zip: ORLANDO, FL 32859

Entity Name: ORLANDO FOODSERVICE. INCORPORATED

FILED Oct 09, 2007 Secretary of State

Littly Na	Me. ORLANI	DO FOODSERVICE, INCORF	ORATED		
Current P	rincipal Plac	e of Business:	New Principal Place o	New Principal Place of Business:	
	ST SAND LAK D, FL 32809	E ROAD			
Current M	lailing Addre	ss:	New Mailing Address	New Mailing Address:	
PO BOX 5 ORLAND(	93447 D, FL 32859				
FEI Number	: 20-0280763	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and	d Address of	Current Registered Agent:	Name and Address of	New Registered Agent:	
258 SOÚT SUITE 420	K. MICHAEL THHALL LANE ) D, FL 32751	,			
	e named entity e of Florida.	submits this statement for the	purpose of changing its registered	office or registered agent, or both,	
SIGNATU	RE: MICHAE	L SWANN			
	Electro	nic Signature of Registered A	gent	Date	
		93(2)(b), F.S., the corporation did ing Trust Fund Contribution ( ).	not receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D ( MCLEAN, COL PO BOX 5934 ORLANDO, FL	47	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	D ( ALTIF, JASON BO BOY 5934		Title: Name:	()Change ()Addition	

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JASON ALTIF D 10/09/2007