P03432

(R	(equestor's Name)	
(A	ddress)	
(A	address)	
(C	City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(B	Business Entity Name)	
(0	Document Number)	
Centified Copies	Certificates of Status	
Special Instructions to Fi	iling Officer:	

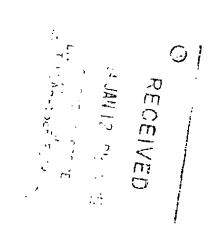
Office Use Only



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IN HE MAN

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

·
ACCOUNT NO. : I2000000195
REFERENCE :
AUTHORIZATION: The Second
COST LIMIT : \$ 35.00
ORDER DATE :
ORDER TIME : 1:43 PM
ORDER NO. : -005
CUSTOMER NO:
FOREIGN FILINGS
NAME: CUMBERLAND FARMS, INC
XX CORPORATE LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY
XXXX AMENDMENT
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Eyliena Baker EXT#

EXAMINER:

COVER LETTER

	ent Section Division of Corporati			
_{SUBJECT:} Cur	nberland Farms, In	C.		
		e of Corporation		
DOCUMENT NU	MBER: <u>P03432</u>			
The enclosed Ame	ndment and fee are submitted for	filing.		
Please return all co	orrespondence concerning this ma	atter to the followin	g:	
Erika Prow	ver			
	Name of Contact Person	· · · · · ·	_	
Cumberlar	nd Farms, Inc.			
	Firm/Company		_	
165 Flande	ers Road			
	Address	ll .	_	
Westborou	ıgh, MA 01581			
	City/State and Zip Code		_	
erika.prow	er@eg-america.co	m		
<u>-</u>	ss: (to be used for future annual i			
For further informa	ation concerning this matter, plea	se call:		
Erika Prow	/er	_{at (} 508	,439-94	173
Name	e of Contact Person		e & Daytime 1	Telephone Number
Enclosed is a check	k for the following amount:			
■\$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	S43.75 Fill Certified Co	_	☐ \$52.50 Filing Fee. Certificate of Status & Certified Copy
<u>Mailing A</u>	<u> (ddress:</u>	Street A	Address:	
Amendment Section			ment Section	

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-3 MUST BE COMPLETED)

	(Pursuant to s. 607.1504, F.S.)
((Pursuant to s. 607.1504. F.S.) SECTION I (1-3 MUST BE COMPLETED) ment number of corporation (if known) as it appears on the records of the Department of State)
P03432	
(Docur	ment number of corporation (if known)
Cumberland Farms, Inc.	O. S. O.
(Name of corporation a	as it appears on the records of the Department of State)
Delaware	3. ^{9/19/84}
(Incorporated under laws of)	(Date authorized to do business in Florida)
(4-7 COMPLE) If the amendment changes the name of the corporation	SECTION II TE ONLY THE APPLICABLE CHANGES) on, when was the change affected under the laws of its inviction of
	•
incorporation?	
incorporation? (Name of corporation after the amendment, adding s	•
(Name of corporation after the amendment, adding s not contained in new name of the corporation)	
(Name of corporation after the amendment, adding s not contained in new name of the corporation) If new name is unavailable in Florida, enter alternate	suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if e corporate name adopted for the purpose of transacting business in Florida)
(Name of corporation after the amendment, adding s not contained in new name of the corporation) If new name is unavailable in Florida, enter alternate	suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if e corporate name adopted for the purpose of transacting business in Florida)
(Name of corporation after the amendment, adding s not contained in new name of the corporation) (If new name is unavailable in Florida, enter alternate	suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if e corporate name adopted for the purpose of transacting business in Florida) on, indicate new period of duration. (New duration)
(Name of corporation after the amendment, adding s not contained in new name of the corporation) If new name is unavailable in Florida, enter alternate If the amendment changes the period of duration	suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if e corporate name adopted for the purpose of transacting business in Florida) on, indicate new period of duration. (New duration)

Title/ Capacity	Name	<u> </u>	<u>Address</u>	Type	of Action
President/Directo	r John Carey	16	5 Flanders Road	<u></u>	■Add
		w	estborough, MA 01	581	□Remove
President	Nicholas Unkovi	c 16	5 Flanders Road		□Add
		<u>w</u>	estborough, MA 01	581	Remove
Secretary	Nicholas Unkovi	c 16	5 Flanders Road		■Add
		<u>w</u>	estborough, MA 015	581	□Remove
Secretary	Laura Sherman	16	5 Flanders Road		□Add
		<u>w</u>	estborough, MA 015	581	■ Remove
					□Add
					□Remove
0. Attached is a coffice of the application under the laws	certificate or docum ion to the Departmen of which it is incor	ent of similar import, evidence nt of State, by the Secretary of corated.	ing the amendment, a State or otherofficial	authenticated not more thaving custody of corpo	than 90 days prior to delivery rate records in the jurisdiction
	h	la			·
		(Signature of a director, pr a receiver or other court a	esident or other office opointed fiduciary, by	r - if in the hands of that fiduciary)	
Nicholas Ur	nkovic	•		cretary	
	(Typed or printed na	anne of person signing)		(Title of person sign	ing)

FILING FEE \$35.00