

P05000144938

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

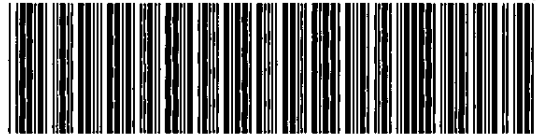
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SECRETARY OF STATE
DIVISION OF CORPORATIONS
07 OCT 23 PM 12:14

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Freed Brothers Inc.
(Name of Corporation)

DOCUMENT NUMBER: P05000144938

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:

Jefferey W. Freed VP/Treasurer
(Name of Contact Person)

Freed Brothers Inc.
(Firm/Company)

2279 Saginaw Road
(Address)

North Port, Florida. 34286
(City/State and Zip Code)

For further information concerning this matter, please call:

Jefferey W. Freed at (941) 391-7452
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 28, 2007

JEFFEREY W. FREED
FREED BROTHERS, INC.
2279 SAGINAW ROAD
NORTH PORT, FL 34386

SUBJECT: FREED BROTHERS, INC.
Ref. Number: P05000144938

We have received your document for FREED BROTHERS, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Document Specialist

Letter Number: 607A00057094

RECEIVED
2007 OCT 23 AM 8:00
CLERK OF STATE
TALLAHASSEE, FLORIDA

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: Freed Brothers Inc.
2. The principal office address: 2279 Saginaw Road, North Port, Florida. 34286
3. The mailing address (if different): _____
4. Date of incorporation/qualification: October 26, 2005 Document number: P05000144938
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Mark W. Freed--Freed Brothers Inc.
4833 Crabapple Ave.
North Port, Florida 34287

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

Jefferey W. Freed
2279 Saginaw Road
(P.O. Box NOT acceptable)
North Port, Florida 34286

FILED STATE
SECRETARY OF CORPORATIONS
DIVISION OF CORPORATIONS
OCT 23 PM 12:14

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.

Jefferey W. Freed
(Signature of an officer or director)

Jefferey W. Freed VP/Treasurer
(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.

Jefferey W. Freed
(Signature of Registered Agent)

19 OCTOBER 2007
(Date)

If signing on behalf of an entity:

Jefferey W. Freed
(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