106000073970

| /D- | equestor's Name) | |
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| (Re | questor's Name) | |
| | | *** |
| (Ad | ldress) | |
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| | | |
| (Cit | ty/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| | | |
| (Bu | ısiness Entity Nan | ne) |
| | | |
| (Do | cument Number) | |
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| Certified Copies | _ Certificates | of Status |
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| Special Instructions to | Filing Officer: | |
| Special instructions to | rilling Officer. | |
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ECCRETARY OF STATE

COVER LETTER

| TO: Amendment Sect Division of Corpo | | • | |
|---|---|---|-----|
| SUBJECT: FUNDAM | ENTAL FOODS OF PAI | _M BEACH, INC | |
| DOCUMENT NUMBER | R: PO600073970 | | |
| The enclosed Statement of | f Change of Registered Office | Agent and fee are submitted for filing. | |
| Please return all correspon | ndence concerning this matter | to the following: | |
| IACK | IE KOLEOS | | |
| JACK | (Name of Con | tact Person) | |
| | · | • | |
| FUND | DAMENTAL FOODS OF P | ALM BEACH, INC | |
| | · (Firm/Co | | |
| 110 U | ERON PARKWAY | | |
| 11971 | (Addr | ess) | |
| | | | |
| ROYAL | PALM BEACH,FL33411 | | |
| | (City/State and | d Zip Code) | |
| For further information co | oncerning this matter, please ca | all: | |
| JACKIE KOLEOS | | at (561) 798-3351 | |
| (Name of | Contact Person) | (Area Code & Daytime Telephone Numb | er) |
| Enclosed is a \$35.00 chec | k made payable to the Departr | ment of State. | |
| 7 1 F | Mailing Address: Amendment Section Division of Corporations 2.0. Box 6327 | Street Address: Amendment Section Division of Corporations Clifton Building | |
| 7 | Callahassee, FL 32314 | 2661 Executive Center Circle | |

TO:

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

| statement of cha | · | 2, 607.1508, or 617.1508, Florida Statutes, this zed under the laws of the State of FLORIDA red agent, or both, in the State of Florida. | |
|---------------------------------------|---|---|-------------|
| | the corporation: FUNDAMENTAL FOODS | | |
| 2. The principal | office address: 4572 AVOCADO BLVD, F | ROYAL PALM BEACH,FL 33411 | |
| 3. The mailing a | ddress (if different): 119 HERON PARK | WAY,ROYAL PALM BEACH,FL 33411 | |
| 4. Date of incorp | poration/qualification: MAY 25,2006 | Document number: P06000073970 | |
| | d street address of the current registered age trment of State: | ent and registered office on file with the | |
| | HERBERT, JOHN R. V.P. | | |
| | 4572 AVOCADO BLVD, | <i></i> | |
| | ROYAL PALM BEACH,FL 33411 | THE T | 1 |
| 6. The name and (if changed): | l street address of the new registered agent | t (if changed) and /or registered offices | - П |
| | JACQUELINE M. KOLEOS | | |
| | 2109 QUAIL DR | | • |
| | (P.O. Box NOT acceptable) | | |
| | WEST PALM BEACH,FL 33409 | | |
| The street address changed will | ess of its registered office and the street a be identical. | address of the business office of its registered agent, | 1 |
| Such change wa authorized by the | as authorized by resolution duly adopted he board, or the corporation has been not | by its board of directors or by an officer so tified in writing of the change. | |
| Tanne | ure of an officer or director) | KENNETH KOLEOS SECRETARY/TREAS. (Printed or typed name and title) | |
| I fürther agree . of my duties, an | the appointment as registered agent and to comply with the provisions of all statu ad I am familiar with and accept the obli ing filed merely to reflect a change in the s been notified in writing of this change. | d agree to act in this capacity. ites relative to the proper and complete performanc gation of my position as registered agent. Or, if this registered office address, I hereby confirm that the | e S ? |
| Jacq | gueline M. Kolass gnature of Registered Agent) | July 12, 2007 | |
| If signing on be | chalf of an entity: | | |
| | Typed or Printed Name) | | |
| | * * * FILINĠ FE | E: \$35.00 * * * | |

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314