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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: CRACKER FLORIDA, INC. (Name of Corporation)	
DOCUMENT NUMBER: <u>PO 7 00 00 31 78 7</u>	
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	owing:
TERRY E. BROWN (Name of Contact Person)
CRACKER FLORIDA, 7 (Firm/Company)	NC
231 Bloomfield DR (Address)	IVE
Westfam SEACH, FL. (City/State and Zip Code	33405
For further information concerning this matter, please call:	
(Name of Contact Person) at (_50)	S/ SO2-2020 a Code & Daytime Telephone Number
England in a \$25.00 shook made mayahle to the Department of Sta	

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

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
1. The name of the corporation: CRACKER FLORIDA, INC.
2. The principal office address: 23/ 8/00 mrie/ DELVE
3. The mailing address (if different): /SAME/.
4. Date of incorporation/qualification: 3/8/2007 Document number: P0 7000031787
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: Frown
CRACKER FLORIDA, INC.
255 EVERNIA, # 719
WEST PALM GEACH, FL 33405 29 3
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): FERRY E. BROWN CRACKER FLORTDA, INC.
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) (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) (Signature of Registered Agent) (Bate)
(Signature of Registered Agent) (Pate) 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