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DIVISION OF CORPORATIONS

COVER LETTER

то:	Amendment Section Division of Corporations	•
SUВЛ	ECT: LOFTON CREEK SEAFOO (Name of	D. INC. Corporation)
DOCU	MENT NUMBER: P08000061937	
The en	closed Statement of Change of Registered Off	ice/Agent and fee are submitted for filing.
Please	return all correspondence concerning this mat	ter to the following:
	BICK	Y A. DAVIS
		Contact Person)
	LOFTON CRE	EK SEAFOOD, INC. Company)
		77 SR 200 (dress)
	YUL (City/State	EE FL 32097 and Zip Code)
For fur	ther information concerning this matter, please	e call:
	RICKY A. DAVIS (Name of Contact Person)	at (904) 548-0803 (Area Code & Daytime Telephone Number)
Enclose	ed is a \$35.00 check made payable to the Depa	artment 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

COVER LETTER

Amendment Section Division of Corporations

TO:

LOTTON OBJECT OF A POOR INC				
SUBJECT: LOFTON CREEK SEAFOOD, (Name of Co	rporation)			
DOCUMENT NUMBER: P08000061937				
The enclosed Statement of Change of Registered Office/	Agent and fee are submitted for filing.			
Please return all correspondence concerning this matter t	to the following:			
RICKY A				
(Name of Cont	tact Person)			
LOFTON CREEK SEAFOOD, INC. (Firm/Company)				
(Firm/Con	mpany)			
	SR 200			
(Address)				
YULEE FL 32097				
(City/State and	Zip Code)			
For further information concerning this matter, please ca	dl:			
DIOLOVA DAVIO	004 540 0000			
RICKY A. DAVIS (Name of Contact Person)	at (904) 548-0803 (Area Code & Daytime Telephone Number)			
(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(and course buy time to spinote trained)			
Enclosed is a \$35.00 check made payable to the Departn	nent of State.			
<u>Mailing Address:</u> Amendment Section	Street Address:			
Amendment Section Division of Corporations	Amendment Section Division of Corporations			
P.O. Box 6327	Clifton Building			
Tallahassee, FL 32314	2661 Executive Center Circle			
	Tallahassee, FL 32301			

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

statement of cha	the provisions of sections 607.0502 , 617.0502 , 607.1508 , or 617.1508 , Florida Statu hange is submitted for a corporation organized under the laws of the State of FLC der to change its registered office or registered agent, or both, in the State of Floric	RIDA
1. The name of	of the corporation: LOFTON CREEK SEAFOOD INC	
2. The principal	al office address: 463477 SR 200 YULEE FL 32097	
3. The mailing a	g address (if different):	
4. Date of incorp	orporation/qualification: 06/26/2008 Document number: P0800006	1937
	and street address of the current registered agent and registered office on file with the partment of State: (If resigned, enter resigned)	e
	TAMEL A. DAVIS	DINS
	8658 FIELDSTONE DRIVE	
	YULEE FL 32097	A 26
6. The name and (if changed):	nd street address of the new registered agent (if changed) and /or registered office):	OP JAN 26 PH 12: 51
	JOE D. JEFFERSON	0) 3
	5412 MORSE AVE (P.O. Box NOT acceptable)	
	JACKSONVILLE FL 32244	
The street address changed will	dress of its registered office and the street address of the business office of its registered.	gistered agent,
Such change wa authorized by the	was authorized by resolution duly adopted by its board of directors or by an offithe board, or the corporation has been notified in writing of the change.	cer so
Rich Son	RICKY A. DAVIS atture of an officer or director) (Printed or typed name and title)	
I hereby accept I further agree of my duties, an document is bei corporation has	pt the appointment as registered agent and agree to act in this capacity. e to comply with the provisions of all statutes relative to the proper and complet and I am familiar with and accept the obligation of my position as registered ag eing filed merely to reflect a change in the registered office address, I hereby co as been notified in writing of this change.	te performance ent. Or, if this onfirm that the
	Signature of Registered Agent) (Date)	2009
	behalf of an entity:	
	IOE D. JEFFERSON (Typed or Printed Name)	

* * * FILING FEE: \$35.00 * * *