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PICK-UP	WAIT	MAIL			
(Ві	usiness Entity Nar	ne)			
(De	ocument Number)				
Certified Copies	Certified Copies Certificates of Status				
Special Instructions to	Filing Officer:	-			

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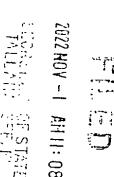
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195	
REFERENCE : 075681 4304045	
AUTHORIZATION: Spelle Reson	
COST LIMIT : \$ 35.00/	
ORDER DATE: October 25, 2022	
ORDER TIME : 9:40 AM	
ORDER NO. : 075681-052	
CUSTOMER NO: 4304045	
CHANGE OF AGENT	
NAME: NEW SOUTHERN FOOD DISTRIBUTORS, INC.	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	
CERTIFIED COPY XX PLAIN STAMPED COPY	
CONTACT PERSON: Alexxis Weiland EXT#	
EXAMINER:	

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

statement of cha	provisions of sections 607.0502, 61 nge is submitted for a corporation or r to change its registered office or r	organized under the law	s of the State of	FL	this	
1. The name of t	he corporation: NEW SOUTHERN	FOOD DISTRIBUTOR	S, INC.			
2. The principal	office address:st Ave OCALA, FL 34474					
3. The mailing a	ddress (if different):					
4. Date of incorp	poration/qualification: 12/17/2008	Document n	umber:P08000	0109174		
	street address of the current registe tment of State: (If resigned, enter re		d office on file w	ith the		
	INCORP SERVICES, INC.					
	17888 67TH COURT NORTH			_		
	LOXAHATCHEE	FL	33470			
6. The name and (if changed):	street address of the new registered	d agent (if changed) and	/or registered of	- ífice		
	Corporation Service Company				2022	
	1201 Hays Street				- AON 2202	A-11-14
	P	O. Box NOT acceptable	<u>. </u>		1	: *
	Tallahassee	FL	32301	_in⊆;		¥ 10
=	ss of its registered office and the s be identical. Is authorized by resolution duly ad the board, or the corporation has be				ere d ag	gent.
Chi	istine Chang	Christine Chang		Secre	etary	
I hereby accept I further agree t of my duties, an document is beil corporation has	the appointment as registered age of an other of the appointment as registered age of comply with the provisions of all of I am familiar with and accept the filed merely to reflect a change been notified in writing of this change of the company	nt and agree to act in t I statutes relative to the e obligation of my posi in the registered office	r proper and coi	mplete pe	erform Or, ij vm tha	ance f this t the
Sign	nature of Registered Agent		Date			—
It signing on bel	half of an entity:					
Grace E. Kirby, i	Asst. Vice President					
Ту	ped or Printed Name					

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