

ACCOUNT NO.

072100000032

REFERENCE

COST LIMIT

773226

ORDER DATE: October 3, 2001

ORDER TIME : 4:37 PM

ORDER NO. : 773226-050

CUSTOMER NO: 7127200

CUSTOMER: Ms. Claudette Harris

Golden Corral

5151 Glenwood Avenue

Raleigh, NC 27612

CHANGE OF AGENT

NAME:

GOLDEN CORRAL FRANCHISING

SYSTEMS, INC.

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY PLAIN STAMPED COPY

CONTACT PERSON: Ellyn Herndon

ب

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

	•		607.1508, or 617.1508, Florida Statutes,
	· ·	•	red office or registered agent, or both, in
-	of the corporation : GOLDEN	CORRAL FRANCHISING	SYSTEMS, INC.
	g address of the corporation		
5151 Gl	enwood Avenue, Raleigh, N	IC 27612	·
3. Date of in-	corporation/qualification: _0	4/20/1991	Document number: P33432
4. The name	and address of the current re	gistered agent and offi	ice:
	C T Corporation System		
	1200 South Pine Island	Road	
	Plantation, FL 33324		SEC P
5. The name	_	tered agent (if changed O. Box Not Acceptab	d) and/or registered office (if changed):
	Corporation Service Cor	mpany	
	1201 Hays Street		
	Tallahassee, Florida 3:	2301	
The street ad agent, as char	dress of its registered office nged, will be identical.	and the street addres	s of the business office of its registered
Such change authorized by	was authorized by resolution the board.	on duly adopted by its	board of directors or by an officer so
(Signate	Dayward are of an officer, chairman or vice ch	airman of the board)	9/28/01 (Date)
Robert B. He	yward, Secretary (Printed or typed name and		<u> </u>
corporation, I further agre	named as registered agent I hereby accept the appoint ee to comply with the provis of my duties, and I am fami	and to accept service tment as registered ag sions of all statutes re	of process for the above stated yent and agree to act in this capacity. lative to the proper and complete the obligation of my position as
	leant a skip	OUV)	10-2-01
If signing on be	chalf of an entity:	Deborah D. Skipp	er
Ansonali	Service Company	Asst. Secretary	
7	(Typed or Printed Name)		(Capacity)
	* * * T	THE INC PER . \$25 00	* * * *

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