P93000069104

GRANT, KUYE & ROGERS

A PROFESSIONAL CORPORATION

155 EAST BAY STREET

Post Office Box 395

CHARLESTON, SOUTH CAROLINA 29402

J. MICHAEL GRANT
JAMES K. KUYK
D. CARLYLE ROGERS, JR.

August 20, 1997

97 SEP - 2 AH 9: 45
TALLAHASSEE FLORIDE

TELEPHONE (803) 723-5200 FACSIMILE (803) 723-5800

Florida Department of State Division of Corporations PO Box 6327 Tallahassee, FL 32314

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RE: Foodstaff of Orlando, Inc.

Gentlemen:

I am enclosing the original and two copies of Statement of Change of Registered Office or Registered Agent or Both for Corporations for filing, along with a check in the amount of \$35.00 as the filing fee. Please file the original and return a file stamped copy for my files. I am enclosing a self-addressed, stamped envelope for your use.

Should you have any questions or problems, please do not hesitate to call.

Very truly yours,

GRANT, KUYK & ROGERS

Lawa C Spaulding

Laura C. Spaulding

Paralegal to James K. Kuyk

/ls

V8 SEP 1 0 1997

RAChg.

Florida Department of State, Sandra B. Mortham, Secretary of State

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 the undersigned corporation organized under the laws of the State of Florida submits the following statement in order to change its registered office or registered agent, or bolds in the State of Florida. 1. The name of the corporation is: Foodstaff of Orlando, Inc.	
submits the following statement in order to change its registered office or registered agent, or bould in the	
State of Florida.	'
1. The name of the corporation is: Foodstaff of Orlando, Inc.	?.
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2. The mailing address of the corporation is: 6500 South O.B.T., Suite 306	
Orlando, FL 32809	
3. Date of incorporation/qualification: 10/05/93 Document number: P93000069104	
4. The name and address of the current registered agent and office:	
Mr. James Bernard	
6900 South O.B.T., Suite 306	
Orlando, FL 32809	
5. The name and address of the new registered agent and office: (P. O. Box Not Acceptable)	
Ms. Tiffany Mason	
6900 South O.B.T., Suite 306	
Orlando, FL 32809	
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.	
3-19-97	
(Signature of an officer, chairman or vice chairman of the board) (Date)	
Bailey Bolen, President	
(Printed or typed name and title) (Date)	
Having been named as registered agent and to accept service of process for the above stated corporation, 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. 8/26/97	
(Signature of Registered Agent) (Date)	
Tiffany Masch If signing on behalf of an entity:	
(Typed or Printed Name) (Capacity)	

FILING FEE: \$35.00

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