

P97000049696

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

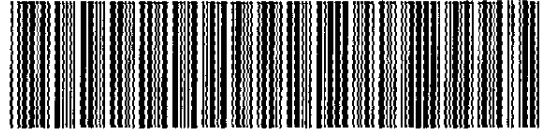
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Special Instructions to Filing Officer:

Office Use Only



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06 JAN 17 AM 11:47
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1/20/06
RA 120
Chg.
Sp



January 11, 2006

FLORIDA SECRETARY OF STATE
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Attn: Corporate Filing Dept.

Re: **TERRACE FRESH, INC.**

Dear Filing Officer:

Enclosed please find a Statement of Change of Registered Office or Registered Agent or Both for Corporations, for the above referenced name, which is to be filed in your office. Also enclosed is check #10200 in the amount of \$35.00 for the filing fee. After filing, please return the file-stamped copy in the enclosed self-addressed envelope. If you have any questions, please contact x153 at 800-345-4647.

Thank you,

Myra Simmons
Registered Agent Services
Enclosures

PO BOX 1831
AUSTIN, TX 78767

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: TERRACE FRESH, INC.

(Name of Corporation)

DOCUMENT NUMBER: P97000049696

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:

Myra Simmons

(Name of Contact Person)

Capitol Corporate Services Registered Agent Department

(Firm/Company)

800 Brazos, Suite 1100

(Address)

Austin, Texas 78701

(City/State and Zip Code)

For further information concerning this matter, please call:

Myra Simmons

(Name of Contact Person)

at (800) 345-4647

(Area Code & Daytime Telephone Number)

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 Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: TERRACE FRESH, INC.
2. The principal office address: 1351 N.W. 22nd Street, Pompani Beach, FL 33069
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 6/4/1997 Document number: P97000049696
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Lasko, Jonathan

1351 NW 22nd Street

Pompano Beach, FL 33069

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Capitol Corporate Services, Inc.

1333 North Duval St.

(P.O. Box NOT acceptable)

Tallahassee, FL 32303

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.

Paula J. Biome
(Signature of an officer or director)

PAULA J. BIOME - ASST SECRETARY
(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.

DeLanie Case
(Signature of Registered Agent)

1-11-06
(Date)

If signing on behalf of an entity:

DeLanie Case, Assistant Secretary on behalf of Capitol Corporate Services, Inc.
(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
CR2E045 (8/05)

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