## P9800058488

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## TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations
SUBJECT: Sanfilippo Holdings, Inc. (Name of corporation)
DOCUMENT NUMBER: P98000058488
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:
Andrew P. Sanfilippo (Name of person)
Sanfilippo Holdings, Inc. (Name of firm/company)
11135 Chester Lake Road East (Address)
Jacksonville, FL 32256 (City/state and zip code)
For further information concerning this matter, please call:
Andrew P. Sanfilippo at 904 292-2328 ext. 231 (Area code & daytime telephone number)
Enclosed is a \$35.00 check made payable to the Department of State.
Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399

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

	•	007.0302, 017.0302, 007.1308, 07 017.1308	سينسوا كالمساوا	
this statement of Florida	-	a corporation organized under the laws of t e its registered office or registered agent, o	or both, if the State	
of Florida.			0	
1. The name of	he corporation: San	filippo Holdings, Inc.	<u> </u>	
2. The principal	office address: 111:	35 Chester Lake Road East	50 5	
	Jacl	ksonville, FL 32257	5m	
3. The mailing a	ddress (if different):	same		
4. Date of incor	ooration/qualification: 0	6/30/1998 Document number:P	98000058488	
	l street address of the cur tment of State:	rrent registered agent and registered office of	a file with the	
	Brant, Moore,	MacDonald & Wells, P.A.	<u></u>	
	50 North Laur	a Street		
	Suite 3100	Jacksonville, FL 32202		
	d street address of the	new registered agent (if changed) and /or	registered office (if	
changed): Andrew P. Sanfilippo				
	11135 Chester	Lake Road East ox or personal mailbox NOT acceptable)		
	Jacksonville,			
The street addre	ess of its registered officed will be identical.	e and the street address of the business offi	ce of its registered	
		on duly adopted by its board of directors or ion has been notified in writing of the chan		
	chairman of vice hairman of the		po Director	
I hereby accept I further agree performatiqe of registered agen office address	the appointment as regito comply with the provi my duties, and Lam fan t. Oy, if Juts document it thereby confirm that the	istered agent and agree to act in this capac isions of all statutes relative to the proper a siliar with and accept the obligation of my is being filed merely to reflect a change in the corporation has been folified in writing of the corporation has been folified in writing the corporation has been folified in the corporation with a corporation with a corporation of the corporation with a corporation	ity. Ind complete position as he registered If this change.	
If signing on beha	gnature of Registered Ageny 2	(Date)		
(**	'yped or Printed Name)	(Capacity)		
	* * *	FILING FEE: \$35.00 * * *		

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO: