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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: J & R FOOD CENTER, INC (Name of Corporation)
DOCUMENT NUMBER: P99 0000 86 309
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:
LUIS G CONEA (Name of Contact Person) J&R FOOD CENTER, INC. (Firm/Company)
1133 E. VINE St (Address)
KISSIMMEE, FL. 34744 (City/State and Zip Code)
For further information concerning this matter, please call:
Luis 6. Collet at (407) 931-3996 (Name of Contact Person) (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

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

Fursuant 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: J&R FOOD CENTER, INC.
2. The principal office address: 1133 E VINE S4
2. The principal office address: 1133 E VINE ST KISSIMMEE, FL. 34744
3. The mailing address (if different):
4. Date of incorporation/qualification: 9/27/1999 Document number: \$\overline{p}99000086309\$
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:
TEJADA DARIO A
TEJADA, DARID A. 1133 E VINE St, KISSIMMEE, FL. 34744
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
LUIS G. COLIEA
1133 E VINE St, KISSIMMEE FL. 34744 FOR E
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.
Suis Askets Leve Luis 6. Cossets, PSD (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.
LUIS 6. CONED 5/21/07 (Signature of Registered Agent) (Date)
If signing on behalf of an entity:
(Typed or Printed Name)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)

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