P99000100518

. (Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
· (Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
:		
	Office Use On	lv



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SECRETARY OF STATE
ALLAHASSEE, FLORIDA

Photo S

COVER LETTER

TO: Amendment Section Division of Corporations							
SUBJECT. T & I FOOD CONCEPTS, INC.							
SUBJECT: T & 1 FOOD CONCEPTS, INC. (Name of Corporation)							
700000100510							
DOCUMENT NUMBER: P99000100518							
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:							
·							
George G. Pappas, Attorney (Name of Contact Person)							
(Name of Contact Person)							
George G. Pappas P.A. (Firm/Company)							
(Firm/Company)							
1822 North Belcher Road, Suite 200							
(Address)							
(.144.400)							
Clearwater, Florida 33765							
(City/State and Zip Code)							
For further information concerning this matter, please call:							
George G. Pappas at (727) 447-4999 (Name of Contact Person) (Area Code & Daytime Telephone Number)							
(Name of Contact Person) (Area Code & Daytime Telephone Number)							
Enclosed is a \$35.00 check made payable to the Department of State.							
Mailing Address: Street Address:							
Amendment Section Amendment Section							
Division of Corporations Division of Corporations Division of Corporations							
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle							
Tallahassee, FL 32314 Tallahassee, FL 32301							

CR2E045 (8/05)

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

statement of chang	ge is submittea	for a corporation org	502, 607.1508, or 617.15 anized under the laws of	the State of \underline{F}	lorida		_
in order	to change its re	egistered office or regi	istered agent, or both, in t	the State of Flo	rida.		
1. The name of the	e corporation:_	T & I Food Con	cepts, Inc.				
2. The principal office address: 10628 Pontifino Circle							
	<u></u>	Trinity, Florie	da 34655				
3. The mailing add	dress (if differe	ent):	·				
4. Date of incorpo	ration/qualifica	ation: 11-15-99	Document numb	er: <u>P990001</u>	00518		
The name and s Florida Departn		f the current registered	agent and registered offi	ce on file with	the		
_	George G.	Pappas P.A.					
	901 North	Hercules Avenue	e Suite C		_		
_	Clearwater	Florida 3376	55		SECR ALLA	07 M/	
6. The name and si (if changed):	treet address of	f the new registered ag	ent (if changed) and /or r	egistered office	1, 0F	07 MAY -8 AH 10: 35	
	1822 North	(P.O. Box NOT acceptab	Suite 200		STATE	35	
-	Clearwater	Florida 3376	· ·				
The street address as changed will be	of its register e identical.	ed office and the stree	et address of the busines	s office of its 1	registere	ed ager	nt,
Such change was authorized by the	authorized by board, or the o	resolution duly adopt corporation has been i	ted by its board of direct notified in writing of the	ors or by an of change.	fficer so		
2\~A	\mathcal{L}		Trifon Houvarda	s, Directo	r		
` •	of an officer or dire	,	,	typed name and title	•		-
I hereby accept th I further agree to of my duties, and document is being corporation has b	e appointment comply with the lam familiar v filed merely t gen notified in	t as registered agent a ne provisions of all sta with and accept the of o reflect a change in a writing of this chang	and agree to act in this c atutes relative to the pro bligation of my position the registered office add te.	apacity. per and compl as registered d lress, I hereby	lete perf igent. (confirm	forman Or, if ti 1 that ti	ice his he
/ XX	1) . 0	5-1.	4-30-07				
(S gnai	ture of Registered A	(gent)		(Date)			-
If signing on beha	lf of an entity:	:				r	
eorge G. Pap	pas ·						
(Турс	ed or Printed Name)					

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