

429881

Florida Department of State
Division of Corporations
Public Access System

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Division of Corporations
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Account Name : C T CORPORATION SYSTEM
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REGISTERED AGENT CHANGE

OKUN PRODUCE INTERNATIONAL, INC.

Certificate of Status	0
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Page Count	02
Estimated Charge	\$35.00

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Corporate Filing

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RA Change
12/22/03

**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: Okun Produce International, Inc.
2. The principal office address: 600 Citadel Drive, Commerce, CA 90040
3. The mailing address (if different): Same
4. Date of incorporation/qualification: 7/5/73 Document number: 429881
5. The name and street address of the current registered agent and registered office on file with the
Florida Department of State:

Steve Trocke

3301 N.W. 125th St.

Miami, FL 33167

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

C T Corporation System

c/o C T Corporation System

(P.O. Box or personal mailbox NOT acceptable)

1200 South Pine Island Road, Plantation, Florida 33324

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 its board, or the corporation has been notified in writing of the change.

Donald G. Alvarado, Sr. Vice Pres., & Secretary

(Signature of officer, chairman or vice chairman of the board)

(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.*

C T Corporation System

By: (Signature)

12/19/2003

(Signature of Registered Agent)

(Date)

If signing on behalf of an entity:

Scot Ferraro

Asst. Secy.

(Typed or Printed Name)

(Capacity)

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

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE AND MAIL TO:
DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

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