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CT CORPORATION SYSTEM

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660 East Jefferson Street Tallahassee, FL 32301 Tel. 850 222 1092 Fax 850 222 7615 CL COULLIETTE DEC 18 2000

*****35.00 *****35.00

Florida Department of State, Sandra B. Mortham, Secretary of State

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 617.1	508, Florida Statutes, the
undersigned corporation organized under the laws of the State of <u>Delaware</u> submits the following statement in order to change its registered office or regist	ered agent, or both, in the
State of Florida.	,
The name of the corporation is: ARAMARK Food Service Corporation	Marke
2. The mailing address of the corporation is: ARAMARK Tower, 1101 Market Stree	, Philadelphia, PA 19107
3. Date of incorporation/qualification: 2/3/1951 Document number	per:
4. The name and address of the current registered agent and office:	06 TAL
The Prentice-Hall Corporation System, Inc.	CRE CAH
1201 Hays Street, Suite 105	TAR TO A
Tallahassee, FL 32301	
5. The name and address of the new registered agent and office: (P. O. Box Not	Acceptable)
C T Corporation System	
c/o C T Corporation System, 1200 South Pine Island Road	
Plantation, Florida 33324	
The street address of its registered office and the street address of the busine agent, as changed, will be identical.	ss office of its registered
Such change was authorized by resolution duly adopted by its board of direct authorized by the board.	tors or by an officer so
Va scy bod	12/14/00
(Signature of an officer, chairman or vice chairman of the board)	(Date)
Priscilla M. Bodnar, Secretary (Printed or typed name and title)	(Date)
Having been named as registered agent and to accept service of process for corporation, I hereby accept the appointment as registered agent and agree I further agree to comply with the provisions of all statutes relative to the performance of my duties, and I am familiar with and accept the obligation registered agent.	the above stated to act in this capacity. roper and complete of my position as
(Signature of Registered Agent)	(Date) 12/15/10)
If signing on behalf of an entity: ANN J. WILLIAMS	,
Assistant Vice President	Capacity)
(Typed or Printed Name) CR2E045(4/95)	FILING FEE: \$35.00
CAMPIO INC 11 CO.	

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