L01000007748						
(Requestor's Name) (Address) (Address)	700296983327					
(City/State/Zip/Phone #)	03/24/1701006019 **55.00 17 HAR 27 H # 26					
Special Instructions to Filing Officer:	RECEIVED DEPARTMENT OF STATE 17 MAR 24 PH 12: 26					
Office Use Only	NAR 28 2017 J. HARRIS					

, Y			
		TION, INC. hassee, Florida 32301	
(850) 224-8870 •	1-800-342-8062	• Fax (850) 222-1222	
D.E. WHEEL DI	STRIBUTOR	S, LLC	
<u></u>			
	<u></u>		
			Art of Inc. File
······································			Art of Inc. File LTD Partnership File
			Foreign Corp. File
			Poleigii Colp. Pile
			Fictitious Name File
			Trade/Service Mark
			Merger File
			Art. of Amend. File
			RA Resignation
			Dissolution / Withdrawal
			Annual Report / Reinstatement
			Cert. Copy
			Photo Copy Certificate of Good Standing
			Certificate of Status
			Certificate of Fictitious Name
			Corp Record Search
			Officer Search
			Fictitious Search
Signature			Fictitious Owner Search
			Vehicle Search
Dequasted b			Driving Record
Requested by: Seth			UCC 1 or 3 File
Name	Date	Time	UCC 11 Search UCC 11 Retrieval



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 27, 2017

CAPITAL CONNECTION SETH

,

SUBJECT: O. E. WHEEL DISTRIBUTORS, LLC Ref. Number: L01000007748

We have received your document for O. E. WHEEL DISTRIBUTORS, LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The person designated as registered agent in the document and the person signing as registered agent must be the same.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 317A00005757

CDEPARTMENT OF STATE

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Nai	me of the limited liability company: $O.E. W$			IBUTURS,		ر. 			
	Principal office address of limited liability com (Note: MUST BE STREET ADDRESS)		1			Mailing address of limited liability company: (<u>Note: MAY BE POST OFFICE BOX</u>)			
	1916 72nd Drive East		1916 72nd Drive East						
	Sarasota, FL 34243			Sarasota,	FL	34243			
ļ	May 16, 2001		L0100007748						
-	Date of filing/registration in Florida		4.	D	ocu	ment number			
(a)									
	Registered Agent and Registered Office shown on the r	records of the !	Florida	Dept. of State:					
	James E. Moore								
	Registered Office Address (MUST BE FLORIDA S	STREET ADI) RESS	2					
	1916 72nd Drive East						ېغت-	•	
	Sarasota	3/	2/3				7 H	ेल इ.स.	
		, fl_34	-240				MAR	an a	
						•	27	STREE STREET	
(b) _	Enter name of NEW Registered Agent and/or NEW R	Logistaned Off	Jac od				P		
	Enter name of <u>ters w Registered Agent</u> and/of <u>New R</u>	<u>tegisteren Ott</u>	<u>ice au</u>	<u>uress</u> :			ē.	C:ST	
	Lance Bullock						N	110	
	NEW Registered Office Address:			· · · · · · · · · · · · · · · · · · ·			ep.		
	1916 72nd Drive East								
		<u> </u>							
	Sarasota	, _{FL} 34	243						
e lin chan	nited liability company is not organized unde age or changes are made, the Florida street ad	r the laws c dress of the	of the regis	State of Florid stered office a	ia, i nd f	it is hereby confi he business offic	rmed the	at after register	
nt wi	ill be identical. Or, in the case of a Florida lin	imited liabil	ity co	ompany, it is h	eret	by confirmed that	t the cha	unge(s)	
wer	re authorized by an affirmative vote of the me eles of organization or the operating agreement	mbers of the	ited l	ated liability compared	omp inv	pany or as otherv	vise pro	vided in	
	RIA			<i>,</i> 1	· ·	Bullock			
S.	ncellarlack								
La	are of a member or authorized representative of a memb	CT.		P	inte	d or typed name of s	ignee		

Division of Corporations• P.O. Box 6327• Tallahassee, FL 32314 FILING FEE: \$25.00

d Agent