

L04000014211

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

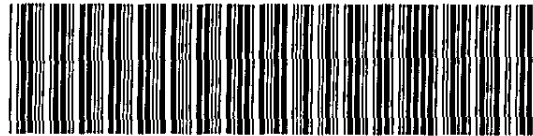
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/24/05--01003--008 **25.30

FILED
2005 OCT 21 PM 12:00
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

J. BRYAN OCT 25 2005

**SHUTTS
&
BOWEN
LLP**

ATTORNEYS AND COUNSELLORS AT LAW

October 20, 2005

Florida Department of State
Division of Corporations
2661 Executive Center Circle
Clifton Building
Tallahassee, Florida 32301

FILED
2005 OCT 21 PM 12:01
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

RE: Registered Agent filings

Dear Sir/Madam:

Enclosed please find the following:

1. Resignation of Registered Agent for Eastern Yacht Sales, Inc. and check number 236559 in the amount of \$35.00
2. Resignation of Registered Agent for Onesource Wholesale Distributors, LLC and check number 236558 in the amount of \$25.00
3. Change of Registered Agent for Florida Molasses Exchange, Inc. and check number 236560 in the amount of \$35.00

Please arrange for filing of these documents. Should you have questions, please don't hesitate to contact me. Thank you.

Sincerely,

SHUTTS & BOWEN LLP


Felicia Hickey
Paralegal

**RESIGNATION OF REGISTERED AGENT FOR A LIMITED
LIABILITY COMPANY**

FILED
2005 OCT 21 PM 12:01
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,

Corporation Company of Miami, hereby resigns as

(Name of Registered Agent)

Registered Agent for Onesource Wholesale Distributors, LLC

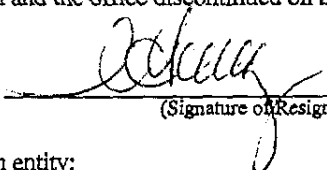
(Name of Limited Liability Company)

L04000014211

(Document Number, if known)

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.


(Signature of Resigning Agent)

If signing on behalf of an entity:

Felicia Hickey

(Typed or Printed Name)

Asst. Secretary of Corporation Company of Miami

(Capacity)

FILING FEES:

\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/
withdrawn limited liability company

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314