

Florida Department of State
Division of Corporations
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To:
Division of Corporations
Fax Number : (850) 617-6380

From:
Account Name : ENGLANDER & FISCHER, P.A.
Account Number : I20070000052
Phone : (727) 898-7210
Fax Number : (727) 898-7218

REGISTERED AGENT CHANGE

MAINSTREAM DISTRIBUTORS, LLC

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

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October 30, 2007

FLORIDA DEPARTMENT OF STATE
Division of Corporations

MAINSTREAM DISTRIBUTORS, LLC
PO BOX 531
ST. PETERSBURG, FL 33731US

SUBJECT: MAINSTREAM DISTRIBUTORS, LLC
REV: LG7000018111

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The registered agent must sign accepting the designation.

If you have any further questions concerning your document, please call (850) 745-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

FAX Aud. #: 807080266337
Letter Number: 007200069432

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P.O. BOX 6327 - Tallahassee, Florida 32314

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

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida:

1. The name of the limited liability company is: MAINSTREAM DISTRIBUTORS, LLC
2. The mailing address of the limited liability company is: _____
PO BOX 531 ST. PETERSBURG FL 33731 US

02/09/2007L07000015111

3. Date of filing/registration in Florida

4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

FERNANDEZ, ANTONIO

Name

ONE PROGRESS PLAZA #2200

Address

ST. PETERSBURG FL 33701 US

City, State and Zip

6. The name and address of the new registered agent and/or office:

SIDNEY WERNER

Name

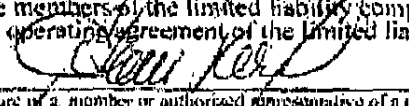
721 FIRST AVENUE NORTH

Florida street address (P.O. Box NOT acceptable)

ST. PETERSBURG FL 33701

City, State and Zip

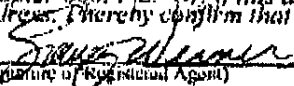
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.


(Signature of a member or authorized representative of a member)

ANTONIO FERNANDEZ

(Printed or typed name of signee)

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 obligations of my position as registered agent as provided for in Chapter 608, F.S. (Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.)


(Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

FILING FEE: \$25.00

(NH5)8 (8/05)

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