

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # L07000080982 1. Entity Name BIG OX DISTRIBUTING LLC					
Principal Place of Business 6435 MOORINGS POINT CIRCLE, UNIT 201 BRADENTON, FL 34202				Mailing Address 6435 MOORINGS POINT CIRCLE, UNIT 201 BRADENTON, FL 34202	
2. Principal Place of Business - No P.O. Box # 12552 Highfield Circle Suite, Apt. #, etc.		3. Mailing Address 12552 Highfield Circle Suite, Apt. #, etc.		09292008 REIN-LLC CR2E101 (1/07)	
City & State Lakewood Ranch, FL		City & State Lakewood Ranch, FL		4. FEI Number 26-0674908	
Zip 34202		Country USA		5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required	
6. Name and Address of Current Registered Agent JUNGERS, DANIEL 6435 MOORINGS POINT CIRCLE, UNIT 201 BRADENTON, FL 34202				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 12552 Highfield Circle City Lakewood Ranch FL Zip Code 34202	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE					
FILE NOW!!! FEE IS \$138.75 After January 1, 2009, Fee will be \$277.50		In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.		Make check payable to Florida Department of State	
9. MANAGING MEMBERS/MANAGERS				10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM JUNGERS, DANIEL M 6435 MOORINGS POINT CIRCLE, UNIT 201 - BRADENTON, FL 34202 - ☐ Delete			TITLE NAME STREET ADDRESS CITY - ST - ZIP	☒ Change ☐ Addition 12552 Highfield Circle Lakewood Ranch, FL 34202
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM PENNIMAN, BRYAN 6435 MOORINGS POINT CIRCLE, UNIT 201 BRADENTON, FL 34202 ☒ Delete			TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition 900136697689 10/07/08--01027--011 **138.75
TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGRM MCKEOWN, DAVE 6435 MOORINGS POINT CIRCLE, UNIT 201 BRADENTON, FL 34202 ☒ Delete			TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete			TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete			TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
REINSTATEMENT 2007 without Penalty 10/8/08					
11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.					
SIGNATURE: Daniel Jungers SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #					

FILED

08 OCT - 7 PM 12: 43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA