## L07000080982

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(Business Entity Name)		
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EXAMINER

## **COVER LETTER**

Division of Corporations	Ф	
D': 0 1	21.11.12	
	Distributing LLC	
Name of Limite	d Liability Company	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered Office	Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:		
Alex Ciaccio		
Name of Person		
Big Ox Distributing LLC		
: Firm/Company	<del></del>	
12217 CLUBHOUSE	DR.	
Address		
COANDATON FI	74202	
City/State and Zip Code		
only state and only odds		
alex@thebigov.com		
alex@thebigox.com 'E-mail address: (to be used for future annual report notification)		
	-	
For further information concerning this matter, please call:		
Alex Ciaccio at (_	855 ) 902-4469	
Name of Person	Area Code & Daytime Telephone Number	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P.O. Box 6327	
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314	
i alialiassee, Fioriua 32301		
Enclosed is a check for the following amount:		
\$25 Filing Fee	\$55 Filing Fee & Certified Copy	

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BÖTH 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.

Name of the limited liability company:	Big Ox Distributing LLC
2. (a) Principal office address of limited liability compa	ny: 5325 Paylor Lane Ste 200
(Note: MUST BE STREET ADDRESS)	Sarasota, Fl.34240
(b) Mailing address of limited liability company:	Same E
(Note: MAY BE POST OFFICE BOX)	
8/23/2011	ين <u>بي</u> L07000080982
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown o	n the records of the Florida Dept. of State:
Registered Agent:	Alessandro Ciaccio
Registered Office Address:	12217 CLUBHOUSE DR
	BRADENTON FL 34202
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>N</u> . <u>NEW Registered Agent</u> :	EW Registered Office address:
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	6371 Business Blvd. Suite 200
( p./cos.bb.i.bb.i.bb.i.bb.i.bb.i.bb.i.bb.i.bb	Sarasota ,FL 34240
If the limited liability company is not organized under the confirmed that after the change or changes are made, the and the business office of the registered agent will be ide liability company, it is hereby confirmed that the change of the members of the limited liability company or as other or the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member	Florida street address of the registered office entical. Or, in the case of a Florida limited (s) was/were authorized by an affirmative vote herwise provided in the articles of organization
Printed or typed name of signee	
I hereby accept the appointment as registered agent and comply with the provisions of all statutes relative to the pand I am familiar with and accept the obligations of my Chapter 608, F.S. Or, if this document is being filed to address, I hereby confirm that the limited liability compositions of the composition of	d agree to act in this capacity. I further agree to proper and complete performance of my duties, position as registered agent as provided for in merely reflect a change in the registered office any has been notified in writing of this change.

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

Signature of Registered Agent