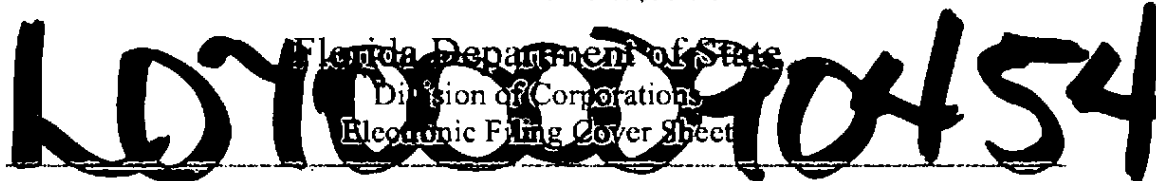


9/25/2019

Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H19000287527 3)))



H190002875273ABC8

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
Fax Number : (954)208-0845

2019 SEP 25 PM 4:42

COPY
FILED

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

RECEIVED

2019 SEP 25 PM 4:42

**LLC REGISTERED AGENT CHANGE
A-KOOL DISTRIBUTION COMPANY, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

T GLASS

SEP 26 2019

LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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. Name of the limited liability company: A-Kool Distribution Company, LLC
2. (a) 606 Lane Avenue North, Suite 2 (b) 606 Lane Avenue North, Suite 2
 Principal office address of limited liability company: Mailing address of limited liability company:
 (Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

Jacksonville, FL 32254Jacksonville, FL 32254

3. 09/05/2007 4. L07000090454
 Date of filing/registration in Florida Document number

5. (a) RAX Co.
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
50 North Laura Street, Suite 3300
 Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Jacksonville, FL 32202

- (b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

Lance HerlongNEW Registered Office Address:606 Lane Avenue North, Ste.2Jacksonville, FL 32254

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]
 Signature of a member or authorized representative of a member

Lance Herlong

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 605, 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]
 Signature of Registered Agent

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

2019 SEP 25 PM 4:42

FILED