

**L07000116506**

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

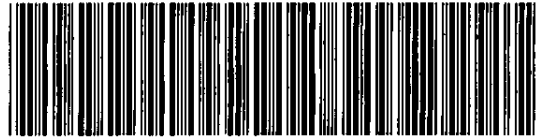
(Document Number)

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FILED  
2009 NOV 25 PM 3:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**C. LEWIS**  
NOV 30 2009  
**EXAMINER**



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

November 17, 2009

ERIC MISENER  
MERCURY DISTRIBUTION AND LOGISTICS, LLC  
1433 MASSARO BLVD.  
TAMPA, FL 33619

SUBJECT: MERCURY DISTRIBUTION & LOGISTICS, LLC  
Ref. Number: L07000116506

We have received your document for MERCURY DISTRIBUTION & LOGISTICS, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a corporation, but your entity is a limited liability company. Please complete and return the enclosed blank form(s).

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6047.

Carolyn Lewis  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 009A00035745

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Mercury Distribution and Logistics, LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Eric Misener

Name of Person

Mercury Distribution and Logistics, LLC

Firm/Company

1433 Massaro Boulevard

Address

Tampa, FL 33619

City/State and Zip Code

emisener@merclog.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Eric Misener

Name of Person

at ( 813 )

463-0812

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**MAILING ADDRESS:**

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

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**FILED**  
2009 NOV 25 PM 3: 51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Mercury Distribution and Logistics, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 11/19/2007 and assigned  
Florida document number L07000116506.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable: 1433 Massaro Boulevard  
(Principal office address MUST BE A STREET ADDRESS) Tampa, FL 33619

Enter new mailing address, if applicable: 1433 Massaro Boulevard  
(Mailing address MAY BE A POST OFFICE BOX) Tampa, FL 33619

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent: Eric Misener  
New Registered Office Address: 1433 Massaro Boulevard  
*Enter Florida street address*  
Tampa, Florida 33619  
*City Zip Code*

**New Registered Agent's Signature, if changing Registered Agent:**

*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.*

  
If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
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		_____	<input type="checkbox"/> Remove
		_____	
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

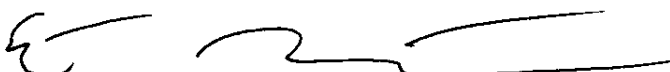
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\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Dated November 22, 2009

  
 \_\_\_\_\_  
 Signature of a member or authorized representative of a member

**Eric Misener, General Counsel**

Typed or printed name of signee

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 TALLAHASSEE, FLORIDA