

Division of Corporations

Page 1 of 1

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

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.

(((H09000052278 3)))



H090000522783ABCO

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 : LEGALZOOM.COM INC.
 Account Number : I20010000062
 Phone : (323) 962-8600
 Fax Number : (323) 962-3889

09 MAR -5 AM 8:52

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS

RECEIVED

09 MAR -5 PM 4:40

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

AMND/RESTATE/CORRECT OR M/MG RESIGN

OAK ST DISTRIBUTION LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

G. MCLEOD Help

MAR - 6 2009

03/05/2008 14:08 FAX

LEGALZOOM2444

002/004

03/05/2008 13:28 FAX

002/004

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: OAK ST DISTRIBUTION 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:

Francyne Carrillo
(Name of Person)

Legalzoom.com, Inc.
(Firm/Company)

7083 Hollywood Blvd., Suite 180
(Address)

Los Angeles, CA 90028
(City/State and Zip Code)

For further information concerning this matter, please call:

Francyne Carrillo at (323) 962-8600
(Name of Person) (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

03/05/2009 13:28 FAX

003/004

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

OAK ST DISTRIBUTION 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 08/10/2008 and assigned Florida document number L08000057123.

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."

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:

New Registered Office Address:

(Enter Florida street address)

Florida

(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)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

09 MAR -5 PM 8:52

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

Title	Name	Address	Type of Action
MGRM	Nancy Gawrysh	4191 Palmer Ave Jacksonville, FL 32210	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	John H Miller	3722 St. Johns Ave Jacksonville, FL 32205 MGRM	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Kevin M Miller	3722 St. Johns Ave Jacksonville, FL 32205	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <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.)

Article II. The principal and mailing address shall be:

4191 Palmer Ave., Jacksonville, FL 32210

Dated

2/25/09

John H Miller

Signature of a member or authorized representative of a member

John H Miller, Member

Typed or printed name of signee