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EXAMINER

COVER LETTER

Division of Corporations	,	
SUBJECT: BNB DISTRIBUTION, LLC		
Name of Limited	Liability Company	
Dear Sir or Madam:		
•		
The enclosed Registered Agent/Registered Office C	Change and fee(s) are submitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
James D'Loughy, Esq.		
Name of Person		
ADVISORI AW RILLO		
ADVISORLAW PLLC Firm/Company		
2955 DCA Poulovard	TABLASS EN ASA	
2855 PGA Boulevard Address		
Palm Beach Gardens, FL 33410		
City/State and Zip Code		
	100 July 100	
idloughy@advisor-law.com E-mail address: (to be used for future annual report notification)		
E-mail address: (to be used for future annual report notification	in)	
For further information concerning this matter, plea	ase call:	
James D'Loughy at (at		
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 32314	
Tallahassee, Florida 32301		
Enclosed is a check for the following amo	ount:	
\$25 Filing Fee	\$55 Filing Fee & Certified Copy	

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH 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:	BNB DISTRIBUTION, LLC
2. (a) Principal office address of limited liability comp	pany: 318 South US Highway 1
(Note: MUST BE STREET ADDRESS)	Suite 210 Jupiter, FL 33477
(b) Mailing address of limited liability company:	318 South US Highway 1
(Note: MAY BE POST OFFICE BOX)	Suite 210 Jupiter, FL_33477
07/14/2010	L10000074065
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown	on the records of the Florida Dept. of State:
Registered Agent:	Zarco Einhorn Salkowski & Brito P.A.
Registered Office Address:	100 S.E. 2nd Street, Suite 2700 Miami, FL 33131
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> Registered Agent:	NEW Registered Office address:
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	318 South US Highway 1 Suite 210 Jupiter ,FL33477
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 included by company, it is because confirmed that the change of the mentions of the limited liability company or as of or the operating agreement of the limited liability company.	the laws of the State of Florida, it is hereby
Signature of a member of subtorized representative of a member Sames D'Loughy, Esq. for Tony Hannan Printed or typed have of signale	
I hereby accept the appointment as registered agent ar comply with the provisions of all statutes relative to the and 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 comp	nd agree to act in this capacity. I further agree to e proper and complete performance of my duties, y position as registered agent as provided for in merely reflect a change in the registered office pany has been notified in writing of this change.
Harman	

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

Signature of Registered Agent