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(Requestor's Name)				
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PICK-UP WAIT MA	IL			
(Dusiness Entity Name)				
(Business Entity Name)				
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Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
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COVER LETTER

TO:	Registration Section Division of Corporations					
SHRH	R & R Distri	bution, LLC				
Name of Limited Liability Company						
Dear S	ir or Madam:					
The en	closed Registered Agent/Registered Offic	e Change and fee(s) are submitted for filing.				
Please	return all correspondence concerning this	matter to the following:				
	Russell Rich					
	Name of Person					
	R & R Distribution, LLC					
	Firm/Company	·				
	2809 Marlin Avenue					
	Address					
	Tampa, FL 33611					
	City/State and Zip Code					
	Russellrich@tampabay.rr.com	า				
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
	loward Stross or Vickie Adams	813 852-6500				
	Name of Person	Area Code & Daytime Telephone Number				
	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314				
Enclosed is a check for the following amount:						
	☑ \$25 Filing Fee	□ \$55 Filing Fee & Certified Copy				

INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR 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.	Na	me of the limited liability company:	R & R Distrib	oution, LLC
2.	(a)		(b)	
	(u)	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	_ (0)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		2809 Marlin Avenue		SAME
		Tampa, FL 33611		
		3/26/2014		<u>L</u> 14000049868
3.		Date of filing/registration in Florida	4.	Document number
5.	(a)			,
٥.	(α)	Registered Agent and Registered Office shown on the records of the	e Florida Dept. of	State:
		Herbert C. Long		
		Registered Office Address (MUST BE FLORIDA STREET A	DDRESS)	
		11350 66th Street, Suite 105		
		Largo . FL_	33733	TALL SEC
				APR 21, APR 21, AHASSI
	(b)	Enter name of NEW Registered Agent and/or NEW Registered (
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered (</u>	Office address:	13. 4. [1
		Russell Rich	TO STATE OF THE PARTY OF THE PA	
		NEW Registered Office Address:		
		2300 Curlew Road, Suite 100		
		Palm Harbor .FL	34683	
the age	e cha ent v is/w	imited liability company is not organized under the law ange or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lia ere authorized by an affirmative vote of the members of icles of organization or the operating agreement of the law.	rs of the State of the registered of bility company of the limited lia	office and the business office of the registered, it is hereby confirmed that the change(s) bility company or as otherwise provided in
_	Siona	rure of a member or authorized representative of a member		Printed or typed name of signee
I in prototo the to	here ovis e obi mer tifie	by accept the appointment as registered agent and agre- ions of all statutes relative to the proper and complete p ligations of my position as registered agent as provided ely reflect a change in the registered affice address. I h d inspriting of this change	ee to act in this performance of I for in Chapter ereby confirm	annaity. I forther agree to comply with the

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