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## COVER LETTER

Division of Corporations	
SUBJECT: 59 Will Name	of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Offic	e Change and fee(s) are submitted for filing.
Please return all correspondence concerning this	matter to the following:
Kathleen Squillan	ite
Squillante Distribu	ting, LC
2751 Breezy Meado	no Rd
AppKa, Ft. 32712 City/State and Zip Code	
E-mail address: (to be used for future annu	
For further information concerning this matter, p	please call:
Kathleen Squillante Name of Person	at (256 ) 665 3971 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 a	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: Squillante Distributing, UC.
2.	(a)	(b)
	` '	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)  Mailing address of limited liability company:  (Note: MAY BE POST OFFICE BOX)
		2751 Breezy Neadow Rd. 2751 Breezy Meadow Rd.
		Apopka, Fl. 32712 Apopka, Fl. 32712
		07/11/2016 L16000130186
3.		Date of filing/registration in Florida  4. Document number
5.	(a)	United States Corporation Agents, Inc.
		Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
		Registered Office Address (MUST BE FLORIDA STREET ADDRESS)
		Octobbeen Squillante
		SSC TO MI
	(b)	
		Enter name of NEW Registered Agent and/dr NEW Registered Office address:
		2751 Breezy Meadow Rd.
		NEW Registered Office Address:
		- ADODKO FL 32712
10.	1. 1.	
the	cha	mited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after nge or changes are made, the Florida street address of the registered office and the business office of the registered
wa	s/wc	vill be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) are authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in
the	aru	cles of organization or the operating agreement of the limited liability company.
S	ignat	ure of a member or authorized representative of a member  Printed or typed name of signee
1 h pre	eret viși	by accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the sons of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept
the to i	obli nere	ons of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept igations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed by reflect a change in the registered office address, I hereby confirm that the limited liability company has been tin writing of this change.
חטח	Linea	Ahlen G. Ag Jul Vante
Sil	nahu	r of Registered Auent