

M03000003404

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

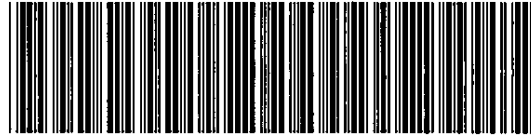
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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07 MAY 31 PM 3:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED

07 MAY 31 PM 1:17  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 921746 4392992

AUTHORIZATION

COST LIMIT : \$ 25.00

ORDER DATE : May 29, 2007

ORDER TIME : 12:13 PM

ORDER NO. : 921746-150

CUSTOMER NO: 4392992

FILED  
07 MAY 31 PM 3:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CHANGE OF AGENT

NAME: PST PRODUCTS, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX        PLAIN STAMPED COPY

CONTACT PERSON: Kelly Courtney

EXAMINER'S INITIALS: \_\_\_\_\_

**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.*

1. The name of the limited liability company is: PST PRODUCTS, LLC

2. The mailing address of the limited liability company is : \_\_\_\_\_

c/o McKesson Corporation, One Post Street, San Francisco, CA 94104

October 10, 2003

M03000003404

3. Date of filing/registration in Florida

4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

C T Corporation System

Name

1200 South Pine Island Road

Address

Plantation, FL 33324

City, State and Zip

6. The name and address of the new registered agent and/or office:

The Prentice-Hall Corporation System, Inc.

Name

1201 Hays Street

Florida street address (P.O. Box NOT acceptable)

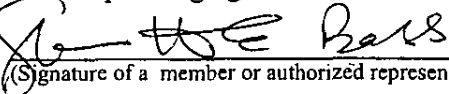
Tallahassee

FL

32301

City, State and Zip

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

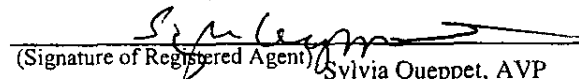


(Signature of a member or authorized representative of a member)

Glenette E. Babb

(Printed or typed name of signee)

*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 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.*



(Signature of Registered Agent) Sylvia Queppet, AVP

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

**FILING FEE: \$25.00**

**FILED**  
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