

# **2011 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# M10000001738

**Entity Name:** MAGNUM DISTRIBUTORS, LLC

**FILED**  
**Nov 10, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

912 NORTH FERDON BLVD.  
CRESTVIEW, FL 32536

**New Principal Place of Business:**

**Current Mailing Address:**

912 NORTH FERDON BLVD.  
CRESTVIEW, FL 32536

**New Mailing Address:**

4154 BEACH DRIVE  
NICEVILLE, FL 32578

**FEI Number:** 59-3373676

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HAVENS, JASON E  
4481 LEGENDARY DR., STE. 204  
DESTIN, FL 32541 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JASON E HAVENS

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: ZACHOS, THOMAS D  
Address: 4154 BEACH DRIVE  
City-St-Zip: NICEVILLE, FL 32578

Title: MGR  
Name: ZACHOS, KALLIOPE  
Address: 4154 BEACH DRIVE  
City-St-Zip: NICEVILLE, FL 32578

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: KALLIOPE ZACHOS

MGR

11/10/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date