I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SHEARER, WILL

Electronic Signature of Signing Officer/Director Detail

SHEARER, WILL 5500 UNITED DRIVE SMYRNA, FL 30094 US

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:	WILL SHEARER	01/19/2024				
	Electronic Signature of Registered Agent			Date		
Officer/Direct	or Detail :					
Title 0	CEO	Title	SRVP			
Name H	HERTZ, DOUGLAS J	Name	MORAITAKIS, PETER			
Address 5	5500 UNITED DRIVE	Address	5500 UNITED DRIVE			
City-State-Zip: S	SMYRNA GA 30082	City-State-Zip:	SMYRNA GA 30082			
Title E	EXEC VP					
Name S	SHEARER, WILL					

# Name and Address of Current Registered Agent:

5500 UNITED DRIVE SMYRNA, GA 30082

**DOCUMENT# 152188** 

# **Current Mailing Address:**

SMYRNA, GA 30082 US

## FEI Number: 59-0570991

5500 UNITED DRIVE

City-State-Zip: SMYRNA GA 33082

Address

5500 UNITED DRIVE

# **Current Principal Place of Business:**

### Entity Name: STANDARD DISTRIBUTING COMPANY

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

# FILED Jan 19, 2024 Secretary of State 0668262954CC

Certificate of Status Desired: No

01/19/2024 Date

**REGISTERED AGENT**