2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 05, 2019
Secretary of State
8886407483CC

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Entity Name: BAKER DISTRIBUTING COMPANY LLC

Current Principal Place of Business:

14610 BREAKERS DR
JACKSONVILLE, FL 32258

Current Mailing Address:

2665 S BAYSHORE DR, STE 901
COCONUT GROVE, FL 33133

FEI Number: 59-2246824

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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:

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	PRESIDENT
Name	ROTH, MATTHEW
Address	14610 BREAKERS DRIVE
City-State-Zip:	JACKSONVILLE FL 32258

Title	VP, SECRETARY, DIRECTOR
Name	LOGAN , BARRY S
Address	2665 S BAYSHORE DR, STE 901
City-State-Zip:	COCONUT GROVE FL 33133

Title	VP, ASST. SECRETARY, DIRECTOR
Name	MENENDEZ, ANA M
Address	2665 S BAYSHORE DR, STE 901
City-State-Zip:	COCONUT GROVE FL 33133

Title	VP AND CFO
Name	CELA , LEV
Address	14610 BREAKERS DR
City-State-Zip:	JACKSONVILLE FL 32258

Title	ASST TREASURER, VP
Name	WAGG, RHONDA
Address	14610 BREAKERS DR
City-State-Zip:	JACKSONVILLE FL 32258

Title	ASST. TREASURER
Name	DISTEFANO, EFY
Address	2665 S BAYSHORE DR, STE 901
City-State-Zip:	COCONUT GROVE FL 33133

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: EFY DISTEFANO ASSISTANT TREASURER 04/05/2019

Electronic Signature of Signing Authorized Person(s) Detail — Date