DOC ID ----> 201808602452

DATE	DOCUMENT ID	DESCRIPTION	FILING	EXPED	CERT	COPY
03/28/2018	201808602452	AGENT ADDRESS CHANGE (LAD)	25.00	0.00	0.00	0.00

Receipt

This is not a bill. Please do not remit payment.

PHANTOM ADMINISTRATIVE, LLC
WILLIAM A. WEIMER
2445 BELMONT AVENUE
YOUNGSTOWN, OH 44505

STATE OF OHIO
CERTIFICATE

Ohio Secretary of State, Jon Husted
3963458

It is hereby certified that the Secretary of State of Ohio has custody of the business records for

PHANTOM IMPORTING & DISTRIBUTING, LLC

and, that said business records show the filing and recording of:

Document(s)	Document No(s):
AGENT ADDRESS CHANGE	**201808602452**

Effective Date: 03/15/2018

United States of America
State of Ohio
Office of the Secretary of State

Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 28th day of March, A.D. 2018.

Jon Husted

Ohio Secretary of State

DOC ID ----> 201808602452

Form 521 Prescribed by:

JON HUSTED
Ohio Secretary of State

Toll Free: (877) SOS-FILE (877-767-3453)
Central Ohio: (614) 466-3910
www.OhioSecretaryofState.gov
busserv@OhioSecretaryofState.gov
File online or for more information: www.OHBusinessCentral.com

Mail this form to one of the following:

Regular Filing (non expedite)
P.O. Box 788
Columbus, OH 43216

Expedite Filing (Two business day processing time. Requires an additional $100.00)
P.O. Box 1390
Columbus, OH 43216

2018 MAR 15 AM 9:48

Statutory Agent Update
Filing Fee: $25
Form Must Be Typed

(CHECK ONLY ONE(1) BOX)

(1) Subsequent Appointment of Agent
- ☐ Corp (165-AGS)
- ☐ LP (165-AGS)
- ☐ LLC (171-LSA)
- ☐ Business Trust (171-LSA)
- ☐ Real Estate Investment Trust (171-LSA)

(2) Change of Address of an Agent
- ☐ Corp (145-AGA)
- ☐ LP (145-AGA)
- ☒ LLC (144-LAD)
- ☐ Business Trust (144-LAD)
- ☐ Real Estate Investment Trust (144-LAD)

(3) Resignation of Agent
- ☐ Corp (155-AGR)
- ☐ LP (155-AGR)
- ☐ LLC (153-LAG)
- ☐ Partnership (153-LAG)
- ☐ Business Trust (153-LAG)
- ☐ Real Estate Investment Trust (153-LAG)

Name of Entity: Phantom Importing & Distributing, LLC

Charter, License or Registration No.: 3963458

Name of Current Agent: William A. Weimer

Complete the information in this section if box (1) is checked

Name and Address of New Agent

Name of Agent

Mailing Address

City | State | ZIP Code

Complete the information in this section if box (1) is checked and business is an Ohio entity

ACCEPTANCE OF APPOINTMENT FOR DOMESTIC ENTITY'S AGENT

The Undersigned, _____ (Name of Agent), named herein as the statutory agent for _____ (Name of Business Entity), hereby acknowledges and accepts the appointment of statutory agent for said entity.

Signature: _____

Individual Agent's Signature/Signature on behalf of Business Serving as Agent

Complete the information in this section if box (2) is checked

New Address of Agent

2445 Belmont Avenue
Mailing Address

Youngstown
City

OH
State

44505-2405
ZIP Code

Complete the information in this section if box (3) is checked

The agent of record for the entity identified on page 1 resigns as statutory agent.

Current or last known address of the entity's principal office where a copy of this Resignation of Agent was sent as of the date of filing or prior to the date filed.

_____
Mailing Address

_____
City

_____
State

_____
Zip Code

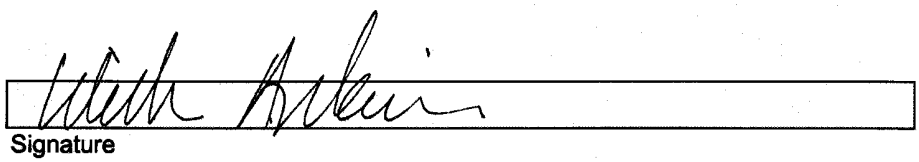
By signing and submitting this form to the Ohio Secretary of State, the undersigned hereby certifies that he or she has the requisite authority to execute this document.

Required

Agent update must be signed by an authorized representative (see instructions for specific information).

If authorized representative is an individual, then they must sign in the "signature" box and print their name in the "Print Name" box.

If authorized representative is a business entity, not an individual, then please print the business name in the "signature" box, an authorized representative of the business entity must sign in the "By" box and print their name in the "Print Name" box.



Signature

By (if applicable)

William A. Weimer, Statutory Agent & Vice President

Print Name

Signature

By (if applicable)

Print Name