## L14000038766

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CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Chelsey Martine cmartin0@cscinfo.com

Date: February 3, 2015

Order#: 467090/002

Re: AB BEVERAGE HOLDINGS, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25 .

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Return Regular Mail in the enclosed envelope.

Attn:Chelsey Martine c/o Corporation Service Company 2711 Centerville Road, Suite 400 Wilmington, DE 19808

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

INCA.XCOA

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, 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.

ı.	Na	me of the limited liability company: AB BEVERAGE I	HOLDIN	GS, LLC				
2.	(a)	9581 County Highway 30A East  Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)		(b) P.O. Box 1943				
Ì	` ,			Ma	failing address of limited liability company: (Note: MAY BE POST OFFICE BOX)			
		Panama City Beach, FL 32413		Birmingham, AL 35201				
		03/07/2014	_	L14000038	766			
3.		Date of filing/registration in Florida	4.	Ι	Document number		_	
5.	(a)	NRAI SERVICES, INC.						
	•	Registered Agent and Registered Office shown on the records of the	e Florida I	Dept. of State:				
		1200 South Pine Island Road						
	•	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				15 FEB	SECRE TALLA	
		Plantation , FL	33324			5-5	SET	
(b)	(b)	Corporation Service Company  Enter name of NEW Registered Agent and/or NEW Registered O  1201 Hays Street  NEW Registered Office Address:	ffice addi	<u>''ess</u> :		COF STATE EE, FLORIDA PH 12: 34	ZD OF STATE E. FLORIDA	
		Tallahassee , FL_	32301					
the age	cha ent w s/we	mited liability company is not organized under the laws nge or changes are made, the Florida street address of the fill be identical. Or, in the case of a Florida limited liabore authorized by an affirmative vote of the members of the cles of organization or the operating agreement of the limited street.	ne regist fility con the limit	ered office a npany, it is l ed liability	and the business offi hereby confirmed the company or as other	ice of the at the ch	e registered ange(s)	
			Dona		thorized Person			
I l pro the to	nerel oviși obli mere	by accept the appointment as registered agent and agree on a full statutes relative to the proper and complete pagations of my position as registered agent as provided juy reflect a change in the registered office address, I held in writing of this change.	e to act i erforma for in Cl reby cor	n this canac	Printed or typed name of city. I further agree uties, and I am famil. F.S. Or, if this docu ne limited liability co	to comp	ly with the and accept being filed aas been	
Si	gna <b>ya</b>	b Registered Agent Corporation Service Company	BY: Syl	via Quepp	et, Assistant Vice I	Presiden	nt	

Division of Corporations ◆ P.O. Box 6327 ◆ Tallahassee, FL 32314 FILING FEE: \$25.00