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S. FRANKLIN
DEC - 6 2022

COVER LETTER

TO: Registration Section
Division of Corporations

American Beverage Holdings LLC

SUBJECT: _____
Name of Limited Liability Company

The enclosed "Application by Foreign Limited Liability Company for Authorization to Transact Business in Florida," Certificate of Existence, and check are submitted to register the above referenced foreign limited liability company to transact business in Florida.

Please return all correspondence concerning this matter to the following:

Crystal McGuire

Name of Person

American Beverage Holdings LLC

Firm/Company

49 Immigration St. Suite 204

Address

Charleston SC 29403

City/State and Zip Code

crystal.mcguire@islandbrandsusa.com

E-mail address: (to be used for future annual report notification)

2:11
-9
P.M. 4:30

For further information concerning this matter, please call:

Crystal McGuire

Name of Contact Person

at (843)

Area Code

696-3265

Daytime Telephone Number

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Enclosed is a check for the following amount:

Please make check payable to: **FLORIDA DEPARTMENT OF STATE**

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy
- \$160.00 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. American Beverage Holdings LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")

2. South Carolina
(Jurisdiction under the law of which foreign limited liability company is organized)

3. 81-2653868
(FEI number, if applicable)

4. NA - not operating yet
(Date first transacted business in Florida, if prior to registration.)
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability)

5. 49 Immigration St.
(Street Address of Principal Office)

6. 49 Immigration St.
(Mailing Address)

Suite 204

Suite 204

Charleston SC 29403

Charleston SC 29403

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Northwest Registered Agent LLC

Office Address: 7901 4th St N STE 300

St. Petersburg, Florida 33702
(City) (Zip code)

Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Tom Glover
(Registered agent's signature)

7901 4th St N STE 300
St. Petersburg, FL 33702

8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage (up to six (6) total):

Title or Capacity: Manager
Name and Address: Name: Scott Hansen
Address: 49 Immigration St.
Suite 204
Charleston SC 29403
 Member
 Authorized Person
 Other _____ Other _____

Title or Capacity: Manager
Name and Address: Name: Chris Edington
Address: 49 Immigration St.
Suite 204
Charleston SC 29403
 Member
 Authorized Person
 Other _____ Other _____

Manager
Name: Crystal McGuire
 Member
Address: 49 Immigration St.
 Authorized
Suite 204
Charleston SC 29403
 Other _____ Other _____

Manager
Name: _____
 Member
Address: _____
 Authorized

 Other _____ Other _____

Manager
Name: _____
 Member
Address: _____
 Authorized

 Other _____ Other _____

Manager
Name: _____
 Member
Address: _____
 Authorized

 Other _____ Other _____

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

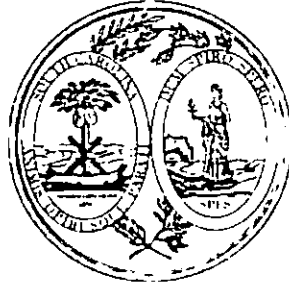
9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Crystal McGuire
Signature of an authorized person

Crystal McGuire, Controller
Typed or printed name of signee

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby Certify that:

AMERICAN BEVERAGE HOLDINGS LLC, a limited liability company duly organized under the laws of the State of South Carolina on May 9th, 2016, with a duration that is at will, has as of this date filed all reports due this office, paid all fees, taxes and penalties owed to the State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to S.C. Code Ann. §33-44-809, and that the company has not filed articles of termination as of the date hereof.

10/4/22

Given under my Hand and the Great Seal of the State of South Carolina this 4th day of October, 2022.


Mark Hammond, Secretary of State