Division of Corporations Electronic Filing Cover Sheet

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(((H180000344133)))



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To:

Division of Corporations

Fax Number : (350) 617-6383

From:

Account Name : C T CORPORATION SYSTEM Account Number : FCA000000023 { Phone : (614)280-3335 Fax Number : (954)208-0845

Enter the email address for this business entity to be used for furtire annual report mailings. Enter only one email address please.

Email Address:___

LLC REGISTERED AGENT CHANGE BULL DURHAM BEER CO., LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25,00

RECEIVED JAN 29 2018

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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT:BULL DURHAM BEER CO., LLC	
Name of	Limited Liability Company
Dear Sir ur Madam:	
The enclosed Registered Agent/Registered Office C	Change and fee(s) are submitted for filing.
Please return all correspondence concerning this in	atter to the following:
Jenniter B. Venable	
Name of Person	
Bull Durham Beer Co., LLC	
Firm/Company	
2619 Western Boulevard	
Address	
Ralcigh, North Carolina 27606	
City/State and Zip Code	
vhoffinan@capitolbroudcasting.com	
E-mail address: (to be used for future annual	report notification)
For further information concerning this matter, ple	ase call:
Vernessa I. Hoffman	919 821-8730 at ()
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following am	ount:
🗆 \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy
INHS18 (2/14)	

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.

1. No	me of the limited liability company: MULL DURHAN	4 BEER CO., LLC	
2. (a)	Principal office address of limited liability compuny: (Note: MIST BE STREET ADDRESS)	(3)	Mailing address of limited liability company: (Note: NAY BE POST OFFICE BOX)
	2619 WESTERN BLVD	2619 W	VESTERN BLVD
	RALEIGH, NC 27606	DATE	IGH, NC 27606
	07/18/2017	.м17000	006122
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	MAGGIE SCHULTZ, ESO.		
5. (a)	Registered Agent and Registered Office shown on the records of RUTLEDGE ECENIA, P.A.	the Florida Dept. of	State:
	Registered Office Address (MUST BE FLORIDA STREET) 119 S. MONROE ST, SUITE 202	ADDRESS)	
	TÄLLAHASSEE, FI	32317	- 8 JA
(b)	Enter name of NEW Registered Agent and/or NEW Registered		Jass 1388
	C T Corporation System		PH 2:4
	NEW Registered Office Address:		₩
	1200 South Pine Island Road	ه با مواد و با در د و د و د و د و د و د و د و د و د و	
	Plantation , Pl	33324	
the che agent v was/we the art Signa I here provise the obt to mer	imited liability company is not organized under the large or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited lierce authorized by an affirmative vote of the members cicles of organization or the operating agreement of the street of member or authorized representative of a member of the appointment as registered agent and agentions of all statutes relative to the proper and complete ligations of my position as registered agent as provided by reflect a change in the registered office ydaress, I	ws of the State of I the registered of ability company, of the limited liab limited liability. <u>Jennifer B. V</u>	Florida, it is hereby confirmed that after flice and the business office of the registered it is hereby confirmed that the change(s) polity company or as otherwise provided in company. Temble Printed or typed name of signee
mong is	orporation System or of Registered Agent Katherine Lackey - Asst.		

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