

2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M1500009415

Entity Name: BREAKTHRU BEVERAGE GROUP, LLC

Current Principal Place of Business:

60 EAST 42ND ST, STE. 1915
NEW YORK, NY 10165

Current Mailing Address:

60 EAST 42ND ST, STE. 1915
NEW YORK, NY 10165 US

FEI Number: 35-2545107

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 MGR
Name MERINOFF, CHARLES
Address 317 MASSACHUSETTS AVE.
City-State-Zip: HAWORTH NJ 07641

Title MGR
Name CRISSES, ANDREW M
Address 8 COW LANE
City-State-Zip: KINGS POINT NY 11024

Title MGR
Name DAVOLIO, JOSEPH F
Address 2039 CHESAPEAKE RD.
City-State-Zip: ANNAPOLIS MD 21409

Title MGR
Name OBERNAUER, MARNE JR.
Address 6 CHERRY HILLS DRIVE
City-State-Zip: CHERRY HILLS VILLAGE CO 80113

Title MGR
Name WIRTZ, WILLIAM R
Address 97 INDIAN HILL ROAD
City-State-Zip: WINNETKA IL 60093

Title MGR
Name WIRTZ, DANIEL R
Address 2039 WEST CORTEZ ST.
City-State-Zip: CHICAGO IL 60622

Title MGR
Name WIRTZ, ARTHUR M
Address 3 HENNEBERRY LANE
City-State-Zip: GOLF IL 60029

Title MGR
Name MILLER, JOHN A
Address 1235 WESTMOOR
City-State-Zip: WINNETKA IL 60009

Continues on page 2

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: CHARLES MERINOFF

MANAGER

02/04/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title MGR
Name LABORDE, JEAN-MARIE
Address 1682 AVENUE FORTUNE FERRINI
13080 AIX EN PROVENCE
City-State-Zip: PROVENCE

Title MANAGER
Name ONUFRYCHUK, JACOB P.
Address 150 HARVARD DRIVE
City-State-Zip: HARTSDALE NY 10530

Title MANAGER
Name JONES, JILL A.
Address 7502 BORDEN ROAD
City-State-Zip: GREENVILLE IN 47124

Title MANAGER
Name STONE, CHAD M.
Address 18 CORNWELLS BEACH ROAD
City-State-Zip: SANDS POINT NY 11050

Title MANAGER
Name ONUFRYCHUK, BRIAN D.
Address 400 SURREY LANE, SE
City-State-Zip: VIENNA VA 22180