(Requestor's Name)						
	(Address)					
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	(City/State/Zip/Phone #)					
PICK-UP	P WAIT MAIL					
☐ PICK-OP	MAIL MAIL					
	(Business Entity Name)	_				
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## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, inge is submitted for a corporati ir to change its registered office	on organized under the law	s of the State of	DE	
1. The name of	the corporation: AMERICAN VIN	ITAGE BEVERAGE INC.			
	office address: 167 N. Green St		IL 60607		
3. The mailing a	address (if different):				
4. Date of incorp	poration/qualification: 09/22/20	10 Document n	umber: <u></u> F10000	0004246	
5. The name and	I street address of the current regramment of State: (If resigned, enter	gistered agent and registered			
	CORPORATE CREATIONS	NETWORK INC.		_	
	801 US HIGHWAY 1			202 	
	NORTH PALM BEACH	FL	33408	2023 SEP	<del></del> -11
6. The name and (if changed):	d street address of the new regist	ered agent (if changed) and	/or registered of	ffice: 2	FILED
	Corporation Service Company	y		PH 1:5	•
	1201 Hays Street			2 2	)
	P.O. Box NOT acceptable			_	
	Tallahassee	FL	32301	_	
The street address changed will	ess of its registered office and the identical.	he street address of the bus	siness office of i	ts registered a	agent.
Such change wa authorized by th	as authorized by resolution duly ne board, or the corporation has	adopted by its board of d been notified in writing o	irectors or by an f the change.	ı officer so	
Signatu	se of an others of director		Vice Presiden		
I further agree to of my duties, an document is beil corporation has	the appointment as registered to comply with the provisions of all I am familiar with and acceping filed merely to reflect a chast been notified in writing of this in Service Company	f all statutes relative to the t the obligation of my posi uge in the registered office	his capacity e proper and con tion as registere address, I here	mplete perfor, ed agent. Or, by confirm th	mance if this at the
By: Y)	nature of Registered Spani	09/21/2023			
- Zığ	nature of Registered Agent		Date		
If signing on be	half of an entity:				
	by, Asst. Vice President				
.1,	yped or Printed Name				

\* \* \* FILING FEE: \$35.00 \* \* \*