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(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Dusiness Entity blance)						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
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CORPORATION SERVICE COMPANY
1201 Hays Street
Tallbassee FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195							
REFERENCE : 553969 8379707							
AUTHORIZATION : Translation							
COST LIMIT : \$ 25.00							
ORDER DATE: March 8, 2023							
ORDER TIME : 10:42 AM							
ORDER NO. : 553969-005							
CUSTOMER NO: 8379707							
CHANGE OF AGENT							
NAME: PAMPA BEVERAGES, LLC							
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:							
CERTIFIED COPY							
XX PLAIN STAMPED COPY							
CONTACT PERSON: Eyliena Baker EXT#							

EXAMINER: _____

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.

L. Na	nme of the limited liability company: PAMPA BEVE	RAGES,	LLC			
			'Es			
()	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)			Mailing address of limited (Note: MAY BE POST	liability company:	
	1110 BRICKELL AVE SUITE 302		1110 BR	CKELL AVE SUITE 302		
	MIAMI, FL 33131		MIAMI, F	L 33131		
	05/02/2003		L0300001	5884		
3.	Date of filing/registration in Florida	4.		Document number		
5. (a)						
J. (u)	Registered Agent and Registered Office shown on the records of YOUNG, MARCELO	of the Florid	da Dept. of Stat	e:	2[
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 1110 BRICKELL AVE 302			_	1 1 1 2023 HAR	
	MIAMI	 33131		_	2-8 AH	
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address: Corporation Service Company			_	9.0.	
	NEW Registered Office Address:					
	1201 Hays Street			_		
	Tallahassee F	TL_32301		_		
change agent v was/wa	imited liability company is not organized under the last or changes are made, the Florida street address of the vill be identical. Or, in the case of a Florida limited lare authorized by an affirmative vote of the members cles of organization or the operating agreement of the	ne registe: liability c s of the lir	red office an ompany, it i nited liabilit	d the business office o s hereby confirmed that y company or as other	f the registered at the change(s)	
	/s/ Sean Callahan			Sean Callahan, Authorized Person		
_	ture of a member or authorized representative of a member			Printed or typed name of	_	
provisi the obl to mere notified	by accept the appointment as registered agent and as ons of all statutes relative to the proper and complet igations of my position as registered agent as providely reflect a change in the registered office address, if in writing of this change.	gree to ac e perforn led for in I hereby c	et in this cap nance of my Chapter 603 confirm that	acity. I further agree t duties, and I am famili 5. F.S. Or, if this docu the limited liability col	o comply with the ar with and accept nent is being filed npany has been	
	ace E. Kirby, Asst. Vice President on behalf of Corp	oration S	ervice Comp	oany		

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

INHS18 (2/14)