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Division of Corporations

Florida Department of State  
Division of Corporations  
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(((H24000177586 3)))



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Fax Number : (850)617-6383

From: Account Name : PARASEC  
Account Number : I20180000086  
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Fax Number : (800)603-5868

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TALLAHASSEE, FLORIDA

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Email Address: \_\_\_\_\_

**LLC REGISTERED AGENT RESIGNATION  
JCO COLLECTIVE LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

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K. SALY

MAY 20 2024

## STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

ROCKET LAWYER CORPORATE SERVICES LLC

Name of Registered Agent

Registered Agent for JCO Collective LLC

Name of Limited Liability Company

L22000197291

Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.



Signature of Resigning Agent

If signing on behalf of an entity:

EDNA PERRY

Typed or Printed Name

Asst. Secretary Rocket Lawyer Corporate Services LLC

Capacity

### FILING FEES:

\$ 85.00	Active limited liability company
\$ 25.00	Administratively dissolved/voluntarily dissolved/ withdrawn limited liability company

Make checks payable to Florida Department of State and mail to:  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

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Division of Corporations

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Fax Number : (850)617-6383

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Account Name : REGISTERED AGENTS INC.  
Account Number : I20090000081  
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**LLC REGISTERED AGENT CHANGE  
THE CHILLED BARREL LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

K. SALY

MAY 20 2024

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# 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.

1. Name of the limited liability company: The Chilled Barrel LLC

2. (a) Principal office address of limited liability company:  
(Note: **MUST BE STREET ADDRESS**)

(b) Mailing address of limited liability company:  
(Note: **MAY BE POST OFFICE BOX**)

06/08/22

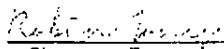
L22000262529

3. Date of filing/registration in Florida4. Document number5. (a) ZENBUSINESS INC.

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

336 E. COLLEGE AVE.Registered Office Address (MUST BE FLORIDA STREET ADDRESS)SUITE 301TALLAHASSEE, FL 32301(b) Registered Agents IncEnter name of NEW Registered Agent and/or NEW Registered Office address:7901 4th St NNEW Registered Office Address:STE 300St. Petersburg, FL 33702

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.




Signature of a member or authorized representative of a member

Robin Jones

Printed or typed name of signer

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 as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.



Signature of Registered Agent

David Roberts

- Assistant Secretary

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

FILING FEE: \$25.00

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