M18000001578

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
(Document Number)							
Certified Copies Certificates of Status							
Special Instructions to Filing Officer:							

Office Use Only



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2022 CHIBARY OF STATE



CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195								
REFERENCE : 795887 8413667								
AUTHORIZATION :								
COST LIMIT : \$ 25.00								
ORDER DATE : June 6, 2023								
ORDER TIME : 9:45 AM								
ORDER NO. : 795887-021								
CUSTOMER NO: 8413667								
CHANGE OF AGENT								
NAME: OLD ELK DISTILLERIES, LLC								
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:								
CERTIFIED COPY XX PLAIN STAMPED COPY								
CONTACT PERSON: Alexxis Weiland-sorenson								

EXAMINER'S INITIALS:

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. 1	Name of the limited liability company: OLD ELK DIS	STILLERIE	ES, LLC					
2. (a	401 W. Mountain Avenue							
2. (a	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		.°/	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)				
	Ft. Collins, CO 80521		-					
	02/13/2018		M180000	118000001578				
3.	Date of filing/registration in Florida	4.		Document num	ber		_	
5. (a	, Florida Filing & Search Services Inc.							
5. (a)	Registered Agent and Registered Office shown on the records	of the Florid	ia Dept. of St	ate:				
	155 Office Plaza Drive, Suite A							
	Registered Office Address (MUST BE FLORIDA STREE	<u> </u>						
				_	\$J	<u></u>		
	Tallahassee	FL32301	1	<u> </u>	- :	73	i	
					BSSV. C		e duse Falune	
(b)	Enter name of NEW Registered Agent and/or NEW Registered Office address:				:2 ⁻ <	ယ	J	
	Enter name of NEW Registered Agent and/or NEW Register	rea Onice A	uuress.		SE SE	ΡM		
	Corporation Service Company				STA.	PM 4: 13		
	NEW Registered Office Address:				Ę	$\overline{\omega}$		
	1201 Hays Street							
	Tailahassee	FL_32301		_				
chang agent	limited liability company is not organized under the less or changes are made, the Florida street address of the will be identical. Or, in the case of a Florida limited were authorized by an affirmative vote of the members ticles of organization or the operating agreement of the street of the st	laws of the he register liability co s of the lin he limited	e State of F red office a ompany, it nited liabili liability co	nd the business of is hereby confirm ity company or as	ttice of the red that the	chang	erca e(s)	
	nature of a member or authorized representative of a member			Printed or typed n	_			
I her provi the ol to me notifi	eby accept the appointment as registered agent and a sions of all statutes relative to the proper and comple bligations of my position as registered agent as provid rely reflect a change in the registered office address, ed in writing of this change.	gree to act te perform ded for in t I hereby c	t in this cap ance of my Chapter 60 onfirm that tion Servi	pacity. I further a oduties, and I am 15, F.S. Or, if this the limited liabil ce Company	igree to con familiar wi document ity compan	nply with and is being has i	ith the accept g filed Seen	
	Ch M Ley	•						
Signa	ture of Registered Agent	AITH IVI. C	Jaspei, A	sst. Vice Presi	ueni			