M1800000 2543

(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:				





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09/28/19--01021--082 **25.00

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CSC - WILMINGTON
251 Little Falls Drive
Wilmington De 19808

800-927-9800 302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Meghan Groom meghan.groom@cscglobal.com

Date: September 24, 2019

Order#: 931814-025

Re: SALT LIFE BEVERAGE, LLC

Enclosed please find:

XX __ Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Meghan Groom c/o Corporation Service Company 251 Little Falls Drive Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

OUCA, XCOA

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.

2. (a)	9310 OLD KINGS ROAD SOUTH, SUITE 1701	(b)	322 SOUTH MAIN STREET
	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	JACKSONVILLE FL 32257		GREENVILLE, SC 29601
	03/14/2018		M18000002543
3.	Date of filing/registration in Florida	4.	Document number
5. (a)	C T CORPORATION SYSTEM		
(u)	Registered Agent and Registered Office shown on the records of	the Florida D	rept, of State:
	1200 SOUTH PINE ISLAND ROAD		
	Registered Office Address (MUST BE FLORIDA STREET	ADDRESS)	
	-		<u> </u>
	PLANTATION . FI	. 33324	SEP 26
(b)	Corporation Service Company Enter name of NEW Registered Agent and/or NEW Registered	l Office addre	
	1201 Hays Street	_	1 02 BY 05 05 05 05 05 05 05 05 05 05 05 05 05
	NEW Registered Office Address:		
	Tallahassee , FL	, 32301	
he cha igent w was/we	mited liability company is not organized under the lange or changes are made, the Florida street address of till be identical. Or, in the case of a Florida limited ling reauthorized by an affirmative vote of the members of the organization or the operating agreement of the	f the registe ability com of the limite	red office and the business office of the registere pany, it is hereby confirmed that the change(s) ed liability company or as otherwise provided in
	/S/ Justin Grow	Justin	Grow, Authorized Person
Signature of a member or authorized representative of a member			Printed or typed name of signee

Signature of Registered Agent Corporation Service Company BY: Grace E. Kirby, Asst. Vice President