Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000170494 3)))



H200001704943ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name: REGISTERED AGENTS INC.

Account Number: 12009000081 Phone: (307)200-2803 Fax Number: (855)330-1010

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

JU. - 8 P. 12: A

REGISTERED AGENT CHANGE GHW BOTTLING SERVICES, INC.

Certificate of Status	0	
Certified Copy	0	
Page Count	02	
Estimated Charge	\$35.00	

O SIMA

JUN 0 9 2020

Electronic Filing Menu

Corporate Filing Menu

Help

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.0502, 6 inge is submitted for a corporation or to change its registered office on	n organized	under the laws of	the State of For	nta	
1. The name of t	the corporation: GHW Bottling Ser	rvices, Inc.				
	office address: 4150 SW 28th Wa		. ==			
Fort Lauderd	tale FL 33312					
3. The mailing a	iddress (if different): 7901 4th St N	STE 300		<u></u>		
St. Petersb	urg FL 33702					
4. Date of incorp	poration/qualification: 03/04/2020	0	Document numb	er: P2000002	1328	
	I street address of the current regis rtment of State: (If resigned, enter	•	and registered off	ice on file with	the	
	CARCAISE, VICKIE					
	4150 SW 28TH WAY				2020	
	FORT LAUDERDALE, FL 33312	2				
6. The name and (if changed):	d street address of the new register	red agent (if	changed) and /or	registered offic	2020 JUN -8 AH 10:	
	Northwest Registered	Agent LL	С		0: 09	
	7901 4th St N STE 300				:. o	
	P.O. Box NOT acceptable					
	St. Petersburg FL 3370)2	<u> </u>			
The street address changed will	ess of its registered office and the be identical.	e street addre	ess of the busines	s office of its i	registered agent,	
Such change wa	as authorized by resolution duly a he board, or the corporation has b	adopted by it been notified	is board of directe in writing of the	ors or by an of change.	ficer so	
Ken // i	leares	Ker	n Meares			
U	re of an officer or director		•	ped name and title		
I further agree performance of agent, Or, if the	the appointment as registered as to comply with the provisions of a my duties, and I am familiar with is document is being filed merely that the corporation has been no	all statutes r h and accept to reflect a	elative to the pro the obligation of change in the res	per and compl f my position a sistered office	is registered	
lon	Glove	06	/05/2020			
Sig	nature of Registered Agent			Date		
If signing on be	half of an entity:					
Tom Glove		_				
T	yped or Printed Name					

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