DOCUMENT# L13000039123

Entity Name: PUBLIC HOUSE TUCSON, LLC

Current Principal Place of Business:

485 RIVERSIDE DRIVE TARPON SPRINGS, FL 34689

Current Mailing Address:

485 RIVERSIDE DRIVE TARPON SPRINGS, FL 34689 US

FEI Number: 46-2326857

Name and Address of Current Registered Agent:

TK REGISTERED AGENT, INC. 101 EAST KENNEDY BLVD., SUITE 2700 TAMPA, FL 33602 US Certificate of Status Desired: No

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

| | Title | MGR | Title | VP |
|---|-----------------|-------------------------|---------------------------------------|--|
| | Name | PUBLIC HOUSE MANAGEMENT | Name | ZEMBILLAS, NICHOLAS M |
| | A data a a | | Address | 485 RIVERSIDE DRIVE |
| | Address | 485 RIVERSIDE DRIVE | City-State-Zip: | TARPON SPRINGS FL 34689 |
| С | City-State-Zip: | TARPON SPRINGS FL 34689 | , , , , , , , , , , , , , , , , , , , | |
| | | | | |
| | T '0. | | Title | VP |
| | Title | VP | Title Name | VP SHIRAH, MATTHEW |
| | Title Name | VP PARKS, AMANDA | Name | SHIRAH, MATTHEW |
| | | | Name Address | SHIRAH, MATTHEW 485 RIVERSIDE DRIVE |
| | Name | PARKS, AMANDA | Name | SHIRAH, MATTHEW |

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: NICHOLAS M ZEMBILLAS

VP

Date

Electronic Signature of Signing Authorized Person(s) Detail