

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000038082

**Entity Name:** DOS TRES SPIRITS, LLC

**Current Principal Place of Business:**

5335 WISCONSIN AVE. NW  
SUITE 440 C/O JUMP MANAGEMENT  
WASHINGTON, DC 20015

**Current Mailing Address:**

5335 WISCONSIN AVE. NW  
SUITE 440 C/O JUMP MANAGEMENT  
WASHINGTON, DC 20015 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

UNITED STATES CORPORATION AGENTS, INC.  
476 RIVERSIDE AVE.  
JACKSONVILLE, FL 32202 US

*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:** CHEYENNE MOSELEY, ASSISTANT SECRETARY, UNITED STATES

03/03/2023

CORPORATION AGENTS, INC  
Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name JORDAN, MICHAEL  
Address 5335 WISCONSIN AVE. NW  
SUITE 440 C/O JUMP MANAGEMENT  
City-State-Zip: WASHINGTON DC 20015

Title MGR  
Name POLK, CURTIS  
Address 5335 WISCONSIN AVE. NW  
SUITE 440 C/O JUMP MANAGEMENT  
City-State-Zip: WASHINGTON DC 20015

Title MGR  
Name JORDAN, MICHAEL  
Address 5335 WISCONSIN AVE. NW  
SUITE 440 C/O JUMP MANAGEMENT  
City-State-Zip: WASHINGTON DC 20015

*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:** CURTIS POLK

**MANAGER**

03/03/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date