## 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000017472

**Entity Name: VAPORNINE LLC** 

**Current Principal Place of Business:** 

13799 BEACH BLVD SUITE 101 JACKSONVILLE, FL 32224

**FILED** May 02, 2016 **Secretary of State** CC7975620363

## **Current Mailing Address:**

13799 BEACH BLVD SUITE 101 JACKSONVILLE, FL 32224 US

FEI Number: 26-4309328 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

HUGHLETT, BENJAMIN 13799 BEACH BLVD SUITE 101 JACKSONVILLE, FL 32224 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: BENJAMIN HUGHLETT 05/02/2016

> Electronic Signature of Registered Agent Date

## Authorized Person(s) Detail:

Title MGRM

HUGHLETT, BENJAMIN J Name 13799 BEACH BLVD Address

SUITE 101

SIGNATURE: BENJAMIN HUGHLETT

City-State-Zip: JACKSONVILLE FL 32224

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.

Electronic Signature of Signing Authorized Person(s) Detail

**MEMBER** 

Date

05/02/2016