# 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L11000044644

Entity Name: VAP BRICKELL LLC

## **Current Principal Place of Business:**

1470 ROYAL PALM SQUARE BLVD FORT MYERS, FL 33919

## **Current Mailing Address:**

1470 ROYAL PALM SQUARE BLVD FORT MYERS, FL 33919

## FEI Number: 45-1645208

### Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

HARDIN, PATTI R 1470 ROYAL PALM SQUARE BLVD FORT MYERS, FL 33919 US Secretary of State CC6770847901

Certificate of Status Desired: No

FILED Apr 29, 2016

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:

Authorized Person(s) Detail :			
Title	MANAGING MEMBER	Title	MANAGER
Name	VAP SUNSHINE LLC	Name	MOSER, ANDREAS
Address	1470 ROYAL PALM SQUARE BLVD	Address	1470 ROYAL PALM SQUARE BLVD
City-State-Zip:	FORT MYERS FL 33919	City-State-Zip:	FORT MYERS FL 33919
Title Name Address	MANAGER LINDENBERGER, STEFAN 1470 ROYAL PALM SQUARE BLVD		
City-State-Zip:	FORT MYERS FL 33919		

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: VAP SUNSHINE LLC

MANAGING MEMBER

04/29/2016

Date

Electronic Signature of Signing Authorized Person(s) Detail

Date