## 2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000049541

Entity Name: KOKO VAPES, LLC

**Current Principal Place of Business:** 

215 E. WASHINGTON ST. MINNEOLA. FL 34715

**Current Mailing Address:** 

215 E. WASHINGTON ST. MINNEOLA, FL 34715

FEI Number: 46-2481343 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JONES, LISA 215 E. WASHINGTON ST. MINNEOLA, FL 34715 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: LISA JONES 04/04/2014

Electronic Signature of Registered Agent

Date

FILED Apr 04, 2014

**Secretary of State** 

CC9832869906

Authorized Person(s) Detail:

Title MGRM Title MGRM

Name JONES, LISA Name JONES, JOHN

Address 215 E. WASHINGTON ST. Address 215 E. WASHINGTON ST.

City-State-Zip: MINNEOLA FL 34715 City-State-Zip: MINNEOLA FL 34715

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: LISA JONES MGRM 04/04/2014