

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000095737

**Entity Name:** WICKED PARK VAPORS LLC

**Current Principal Place of Business:**

1555 SEMORAN BLVD. SUITE 1111  
ORLANDO, FL 32792

**Current Mailing Address:**

1555 SEMORAN BLVD. SUITE 1111  
ORLANDO, FL 32792 US

**FEI Number:** 46-3133220

**Certificate of Status Desired:** No

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

MORTON, STARLA T  
2290 HAULOVER BLVD  
DELTONA, FL 32738 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:** STARLA MORTON

03/31/2016

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name MORTON, STARLA T  
Address 3312 CALDWELL ST  
City-State-Zip: DELTONA FL 32738

*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:** STARLA MORTON

OWNER

03/31/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date