

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000028615

Entity Name: MEDICAL MARIJUANA DISPENSARY OF FLORIDA LLC

Current Principal Place of Business:

1738 BLANCHE AVE
MELBOURNE, FL 32934

Current Mailing Address:

1738 BLANCHE AVE
MELBOURNE, FL 32934 US

FEI Number: 46-4951750

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LEGALINC CORPORATE SERVICES INC.
2846 NW 79TH AVENUE
DORAL, FL 33122 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: _____

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGRM	Title	MGRM
Name	GRIFFIN, CHIP	Name	GRIFFIN, JEANIE
Address	1738 BLANCHE AVE	Address	1738 BLANCHE AVE
City-State-Zip:	MELBOURNE FL 32934	City-State-Zip:	MELBOURNE FL 32934

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: CHIP GRIFFIN

OWNER

04/20/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date