

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000079370

**Entity Name:** THE VAPE SHOPPE, LLC

**Current Principal Place of Business:**

160 S. SEMORAN BLVD  
ORLANDO, FL 32807

**Current Mailing Address:**

160 S. SEMORAN BLVD  
ORLANDO, FL 32807 US

**FEI Number:** 46-5741889

**Certificate of Status Desired:** No

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

CHANG, LIREN  
2452 FORMAX DR  
ORLANDO, FL 32828 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 MGR  
Name CHANG, LIREN  
Address 2452 FORMAX DR  
City-State-Zip: ORLANDO FL 32828

*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:** LIREN CHANG

**OWNER**

**01/19/2018**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date