

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000035060

**Entity Name:** EPIC CANNABIS DISPENSARIES LLC

**Current Principal Place of Business:**

31564 U.S. 19 NORTH  
PALM HARBOR, FL 34684

**Current Mailing Address:**

31564 U.S. 19 NORTH  
PALM HARBOR, FL 34684 US

**FEI Number: 81-5377613**

**Certificate of Status Desired: No**

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

GUJU, MICHAEL J ESQ  
31564 US 19 NORTH  
PALM HARBOR, FL 34684 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: MICHAEL J GUJU ESQ**

**04/17/2024**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name GUJU, MICHAEL J  
Address 31564 US HIGHWAY 19 N  
City-State-Zip: PALM HARBOR FL 34684

Title MGR  
Name JALLO, PAUL  
Address 31564 US HIGHWAY 19 N  
City-State-Zip: PALM HARBOR FL 34684

Title MGR  
Name MCKNIGHT, WILLIAM  
Address 31564 US HIGHWAY 19 N  
City-State-Zip: PALM HARBOR FL 34684

Title MGR  
Name L.D. CROW, TRUSTEE, CROW FAMILY TRUST  
Address 31564 U.S. 19 NORTH  
City-State-Zip: PALM HARBOR FL 34684

*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: L. D. CROW**

**MGR**

**04/17/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date