

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000058066

**Entity Name:** RISE N VAPE SMOKE SHOP LLC. #1

**Current Principal Place of Business:**

16670 SE US HWY 441  
SUITE 103  
SUMMERFIELD, FL 34491

**Current Mailing Address:**

16670 SE US HWY 441  
SUITE 103  
SUMMERFIELD, FL 34491 US

**FEI Number:** 82-4036583

**Certificate of Status Desired:** Yes

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

BURCH, ERICA N  
16670 S US HWY 441  
SUIT 103  
SUMMERFIELD, FL 34491 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 OWNE  
Name BURCH, JOHN H JR  
Address 11021 SE 66TH TERRACE  
City-State-Zip: BELLEVIEW FL 34420

Title OWNE  
Name BURCH, ERICA N  
Address 16670 S US HWY 441  
SUIT 102  
City-State-Zip: SUMMERFIELD FL 34491

*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:** ERICA BURCH

**OWNER**

**04/11/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date