

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000197608

**Entity Name:** CANNABIS DOCTOR L.L.C.

**Current Principal Place of Business:**

1688 MERIDIAN AVE #700  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

1350 COVEY CT  
VENICE, FL 34293 US

**FEI Number:** 83-1609942

**Certificate of Status Desired:** No

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

CETTEI, ANDREW S  
1350 COVEY CT  
VENICE, FL 34293 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            PRES  
Name            CETTEI, ANDREW S  
Address        1350 COVEY CT  
City-State-Zip: VENICE FL 34293

*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:** ANDREW CETTEI

**PRESIDENT**

**03/12/2019**

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

\_\_\_\_\_  
Date