

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000262716

**Entity Name:** CANNA CAPITAL PARTNERS, LLC

**Current Principal Place of Business:**

20900 NE 30TH AVENUE  
SUITE 318  
AVENTURA, FL 33180

**Current Mailing Address:**

20900 NE 30TH AVENUE  
SUITE 318  
AVENTURA, FL 33180 US

**FEI Number:** 36-4931227

**Certificate of Status Desired:** No

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

CANNAVEST, INC.  
20900 NE 30TH AVENUE  
SUITE 318  
AVENTURA, FL 33180 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 AMBR  
Name ORANGE ISLAND VENTURES, LLC  
Address 2890 NE 187TH STREET  
City-State-Zip: AVENTURA FL 33180

Title AMBR  
Name E54 CAPITAL, LLC  
Address 19963 NE 19TH PLACE  
City-State-Zip: NORTH MIAMI BEACH FL 33180

Title AMBR  
Name CANNAVEST, INC  
Address 20900 NE 30TH AVENUE SUITE 318  
City-State-Zip: AVENTURA FL 33180

*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:** ABRAHAM WEINTRAUB

MGR - CANNAVEST INC

04/24/2019

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

\_\_\_\_\_  
Date