

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000229157

Entity Name: COME SMOKE WIT ME, LLC

Current Principal Place of Business:

6121 SPRING LAKE TERR
FORT PIERCE, FL 34951

Current Mailing Address:

6121 SPRING LAKE TERR
FORT PIERCE, FL 34951 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALICE Z. BOATWRIGHT
6121 SPRING LAKE TERR
FORT PIERCE, FL 34951 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 OWNER ED OWENS
Address 3631 KIRKPATRICK CIR UNIT 15
City-State-Zip: JACKSONVILLE FL 32201

Title MGR
Name OWNER DARIN SLATER
Address 111 SANDALWOOD DRIVE
City-State-Zip: FORT PIERCE FL 34947

Title MGR
Name ADMINISTRATOR ALICE Z.
BOATWRIGHT
Address 6121 SPRING LAKE TERR
City-State-Zip: FORT PIERCE FL 34951

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: ED OWENS

MGR

06/30/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date