

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000116242

Entity Name: HE SMOKED SHE SMOKED LLC

Current Principal Place of Business:

6031 35TH LN E
ELLENTON, FL 34222

Current Mailing Address:

6031 35TH LN E
ELLENTON, FL 34222

FEI Number: 45-3578181

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JUMPER, JAMES J
6031 35TH LN E
ELLENTON, FL 34222 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 MGRM
Name JUMPER, JAMES J
Address 6031 35TH LN E
City-State-Zip: ELLENTON FL 34222

Title MGRM
Name JUMPER, NADA T
Address 6031 35TH LN E
City-State-Zip: ELLENTON FL 34222

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: NADA T JUMPER

MGRM

04/24/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date