FEI Number	: 46-2342227		Certificate of Status De	esired: No
Name and A	Address of Current Registered Agent:			
CLARK, LISA A 1333 SW 17TH CAPE CORAL,	PL			
The above name	d entity submits this statement for the purpose of changing i	its registered office or regis	tered agent, or both, in the State of	Florida.
	d entity submits this statement for the purpose of changing i E: LISA A CLARK	its registered office or regis	tered agent, or both, in the State of	Florida. 03/13/2017
		its registered office or regis	tered agent, or both, in the State of	
SIGNATURE	E: LISA A CLARK	its registered office or regis	tered agent, or both, in the State of	03/13/2017
SIGNATURE	E: LISA A CLARK Electronic Signature of Registered Agent	its registered office or regis	tered agent, or both, in the State of	03/13/2017
SIGNATURE Authorized	E: LISA A CLARK Electronic Signature of Registered Agent Person(s) Detail :			03/13/2017
SIGNATURE Authorized	E: LISA A CLARK Electronic Signature of Registered Agent Person(s) Detail : MGRM	Title	MGRM	03/13/2017

**Current Mailing Address:** 

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.

03/13/2017 SIGNATURE: LISA CLARK MGRM

Electronic Signature of Signing Authorized Person(s) Detail

FILED Mar 13, 2017 **Secretary of State** CC0183867204

Date

## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000042247

Entity Name: VAPIN STATION, LLC

## **Current Principal Place of Business:**

4279 RIFKIN AVE. NORTH PORT, FL 34286