## 2015 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

**Current Mailing Address:** 

4279 RIFKIN AVE.

NORTH PORT. FL 34286 US

FEI Number: 46-2342227 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CLARK, LISA A 1333 SW 17TH PL CAPE CORAL, FL 33991 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: LISA A CLARK 02/25/2015

Electronic Signature of Registered Agent

Date

**FILED** Feb 25, 2015

**Secretary of State** 

CC7882285839

Authorized Person(s) Detail:

Title MGRM Title **MGRM** 

Name CLARK, LISA Name MILLER, DANIELLE Address 4279 RIFKIN AVE. Address 4279 RIFKIN AVE.

City-State-Zip: NORTH PORT FL 34286 City-State-Zip: NORTH PORT FL 34286

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.