

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000049228

Entity Name: MEDICALMARIJUANADAYTONABEACH LLC

Current Principal Place of Business:

3713 PAIGE ST.
PORT ORANGE, FL 32129

Current Mailing Address:

3713 PAIGE ST.
PORT ORANGE, FL 32129

FEI Number: 47-3183987

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SINGLETON, DAVID E
3713 PAIGE ST.
PORT ORANGE, FL 32129 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 SINGLETON, DAVID E
Address 3713 PAIGE ST.
City-State-Zip: PORT ORANGE FL 32127

Title AMGR
Name ROY, JOHN R
Address 6237 KLONDIKE DRIVE
City-State-Zip: PORT ORANGE FL 32129

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: DAVID E. SINGLETON

MANAGER/OWNER

03/01/2016

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date