

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000149896

Entity Name: CANOPY GROWERS LLC

Current Principal Place of Business:

33240 LARKIN ROAD
DADE CITY, FL 33523

Current Mailing Address:

33240 LARKIN ROAD
DADE CITY, FL 33523

FEI Number: 59-3659373

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PRICE, DANIEL A
33240 LARKIN ROAD
DADE CITY, FL 33523 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 MANAGER
Name CANOPY GROWERS
Address 33240 LARKIN ROAD
City-State-Zip: DADE CITY FL 33523

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: DANIEL PRICE

MANAGER

04/30/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date