## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000173661

Entity Name: FULL THROTTLE HOOKAH LLC

**Current Principal Place of Business:** 

38515 US HWY 19 N PALM HARBOR. FL 34684

**Current Mailing Address:** 

38515 US HWY 19 N

PALM HARBOR, FL 34684 US

FEI Number: 82-2495396 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HASKINS, SAMANTHA 38515 US HWY 19 N PALM HARBOR, FL 34684 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: SAMANTHA HASKINS 04/18/2019

Electronic Signature of Registered Agent

Date

FILED Apr 18, 2019

**Secretary of State** 

9945378629CC

Authorized Person(s) Detail:

Title AR Title AR

NameHASKINS, SAMANTHANameKOSTACKY, MICHAELAddress38515 US HWY 19 NAddress1412 SEAGULL DR APT 304City-State-Zip:PALM HARBOR FL 34684City-State-Zip:PALM HARBOR FL 34685

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: SAMANTHA HASKINS

Electronic Signature of Signing Authorized Person(s) Detail

OWNER 04/18/2019

Date