

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000451940

**Entity Name:** RED CLAW VENDING, LLC

**Current Principal Place of Business:**

670 NORTHSIDE DR S  
JACKSONVILLE, FL 32218

**Current Mailing Address:**

670 NORTHSIDE DR S  
JACKSONVILLE, FL 32218 US

**FEI Number:** 87-4522842

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

DUPRA, NICOLE B  
670 NORTHSIDE DR S  
JACKSONVILLE, FL 32218 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            AMBR  
Name            DUPRA, RONALD E JR.  
Address        670 NORTHSIDE DR S  
City-State-Zip: JACKSONVILLE FL 32218

*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:** RONALD EDWARD DUPRA JR

**OWNER**

**02/22/2024**

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date