

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000336222

**Entity Name:** SMOKE VAPE REVOLUTION, LLC

**Current Principal Place of Business:**

19900 E COUNTRY CLUB DR.  
APT. 1005  
AVENTURA, FL 33180

**Current Mailing Address:**

19900 E COUNTRY CLUB DR.  
APT. 1005  
AVENTURA, FL 33180 US

**FEI Number:** 61-2043130

**Certificate of Status Desired:** Yes

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

DC ENTITY SOLUTIONS, LLC  
1000 BRICKELL AVENUE  
SUITE 480  
MIAMI, FL 33131 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 BENSUSAN LEVY, DANIEL  
Address 19900 E COUNTRY DR. APT. 1005  
City-State-Zip: AVENTURA FL 33180

*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 BENSUSAN LEVY

**MANAGER**

**03/13/2023**

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

\_\_\_\_\_  
Date