

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000058375

Entity Name: CLEAR SKIES TITLE, LLC**Current Principal Place of Business:**500 E. BROWARD BOULEVARD
SUITE 1450
FORT LAUDERDALE, FL 33394**Current Mailing Address:**500 E. BROWARD BOULEVARD
SUITE 1450
FORT LAUDERDALE, FL 33394 US**FEI Number:** 20-1739782**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BRONSTEIN, RONNIE ESQ.
500 E. BROWARD BOULEVARD
SUITE 1450
FORT LAUDERDALE, FL 33394 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	MGRM
Name	BRONSTEIN, RONNIE
Address	500 E. BROWARD BOULEVARD SUITE 1450 STUIE 1540
City-State-Zip:	FORT LAUDERDALE FL 33394
Title	MANAGER
Name	STONE, DAVID ESQ.
Address	C/O MBS, LLP, 500 E. BROWARD BOULEVARD SUITE 1450
City-State-Zip:	FORT LAUDERDALE FL 33394

Title	MGRM
Name	MANSFIELD, GARY
Address	C/O MBS, LLP, 500 E. BROWARD BOULEVARD SUITE 1450
City-State-Zip:	FORT LAUDERDALE FL 33394

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: RONNIE BRONSTEIN**MGR****01/16/2020**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date