

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000093062

Entity Name: CLIP TRAINING LLC

Current Principal Place of Business:

1063 BLUEGRASS DR.
GROVELAND, FL 34736

Current Mailing Address:

1063 BLUEGRASS DR.
GROVELAND, FL 34736

FEI Number: 26-1076790

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BRUZZESE, J. PETER
1063 BLUEGRASS DR.
GROVELAND, FL 34736 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	Title	MGRM
Name	BRUZZESE, J. PETER	Name	DUGGAN, TIMOTHY
Address	1063 BLUEGRASS DR.	Address	1370 THOMAS AVE
City-State-Zip:	GROVELAND FL 34736	City-State-Zip:	NORTH BRUNSWICK NJ 08902

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: TIMOTHY DUGGAN

MGRM

02/25/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date