

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000009234

**FILED**  
**Feb 18, 2016**  
**Secretary of State**  
**CC2053003541**

**Entity Name:** KEYRAN LLC

**Current Principal Place of Business:**

8TH FLOOR, UNION HOUSE UNION STREET  
ST HELIER, JERSEY JE2 3RF

**Current Mailing Address:**

8TH FLOOR, UNION HOUSE UNION STREET  
ST HELIER, JERSEY JE2 3RF JE

**FEI Number:** 30-0785241

**Certificate of Status Desired:** Yes

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

FAIRWAYS TRUST  
320 85TH ST #14  
MIAMI BEACH, FL 33141 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:** C FALLE

02/18/2016

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name BRACKEN-SMITH, LOUISE  
Address 8TH FL, UNION HOUSE, UNION ST  
City-State-Zip: ST. HELIER CHANNEL ISLANDS

Title MGR  
Name LE SEELLEUR, ANDREW  
Address 8TH FL, UNION HOUSE, UNION ST  
City-State-Zip: ST. HELIER CHANNEL ISLANDS

Title MGR  
Name ROTHWELL, ALISTAIR  
Address 8TH FL, UNION HOUSE, UNION ST  
City-State-Zip: ST. HELIER CHANNEL ISLANDS

Title MGR  
Name PLEDGER, JAMES  
Address 8TH FL, UNION HOUSE, UNION ST  
City-State-Zip: ST. HELIER CHANNEL ISLANDS

*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:** BRACKEN-SMITH , LOUISE

**DIRECTOR**

02/18/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date