

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000073328

**Entity Name:** CLEAR CAPITAL LLC

**Current Principal Place of Business:**

1417 PINE STREET  
KEY WEST, FL 33040

**Current Mailing Address:**

PO BOX 6342  
KEY WEST, FL 33041 US

**FEI Number:** 27-3024191

**Certificate of Status Desired:** No

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

BEJAR, VALENTIN  
18611 SW 24 ST  
MIRAMAR, FL 33029 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 FALKNER, SHANNON  
Address PO BOX 6342  
City-State-Zip: KEY WEST FL 33041

*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:** SHANNON FALKNER

MGRM

04/30/2017

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

\_\_\_\_\_  
Date