

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000045777

Entity Name: 2CLAPS , LLC

Current Principal Place of Business:

4761 MAPLE PARK STREET
ORLANDO, FL 32811

Current Mailing Address:

4761 MAPLE PARK STREET
ORLANDO, FL 32811 US

FEI Number: 45-1765352

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ANDERSON, TREVOR
4761 MAPLE PARK STREET
ORLANDO, FL 32811 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 | ANDERSON, AMBER | Name | ANDERSON, TREVOR |
| Address | 4761 MAPLE PARK STREET 4761 MAPLE PARK STREET | Address | 4761 MAPLE PARK STREET |
| City-State-Zip: | ORLANDO FL 32811 | City-State-Zip: | ORLANDO FL 32811 |

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: TREVOR ANDERSON

OWNER

02/24/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date