

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000095158

**Entity Name:** VISION CLIPS, LLC

**Current Principal Place of Business:**

7546 W COMMERCIAL BLVD.  
LAUDERHILL, FL 33319

**Current Mailing Address:**

7546 W COMMERCIAL BLVD.  
LAUDERHILL, FL 33319 US

**FEI Number:** 46-1465307

**Certificate of Status Desired:** No

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

WALKER, MIGUEL T  
4844 NORTH S.R.7  
APT.204  
COCONUT CREEK, FL 33073 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 WALKER, MIGUEL T  
Address 7546 W COMMERCIAL BLVD.  
City-State-Zip: LAUDERHILL FL 33319

Title MGRM  
Name GRANT, JASON G  
Address 7546 W COMMERCIAL BLVD.  
City-State-Zip: LAUDERHILL FL 33319

Title MGRM  
Name MCFARLANE, MICHAEL G  
Address 6031 KIMBERLY BLVD  
City-State-Zip: N LAUDERDALE FL 33068

*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:** MIGUEL WALKER

MGRM

04/08/2015

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

\_\_\_\_\_  
Date