

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000138188

**Entity Name:** CHECKGANG CLOTHING LLC

**Current Principal Place of Business:**

18459 PINES BLVD  
SUITE 464  
PEMBROKE PINES, FL 33029

**Current Mailing Address:**

18459 PINES BLVD  
SUITE 464  
PEMBROKE PINES, FL 33029 US

**FEI Number:** 47-1553832

**Certificate of Status Desired:** No

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

OMAR, HOSEIN  
2450 N.W 208 ST  
MIAMI GARDENS, FL 33056 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 MGR  
Name HOSEIN, OMAR  
Address 2450 N.W 208 ST  
City-State-Zip: MIAMI GARDENS FL 33056

Title MGR  
Name LEJARDI, NOLAN  
Address 17515 N.W 87 CT.  
City-State-Zip: HIALEAH FL 33018

*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:** NOLAN LEJARDI

**MGR**

**01/08/2015**

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

\_\_\_\_\_  
Date