#### 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000158737

Entity Name: CLASH LLC

Apr 17, 2016 **Secretary of State** CC2424366009

**FILED** 

## **Current Principal Place of Business:**

927 LINCOLN ROAD SUITE 200 MIAMI BEACH, FL 33139

# **Current Mailing Address:**

927 LINCOLN ROAD SUITE 200 MIAMI BEACH, FL 33139 US

FEI Number: 61-1747686 Certificate of Status Desired: No

### Name and Address of Current Registered Agent:

USXPERTISE, INC. 1674 MERIDIAN AVENUE MIAMI BEACH, FL 33139 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

LACAILE, CEDRIC Name 43, RUE DE LA PLAINE Address

City-State-Zip: PARIS FR-75020

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.