**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**
**Feb 02, 2017**
**Secretary of State**
**CC2032876632**

DOCUMENT# L16000149550

**Entity Name:** NSB CLOTHING COMPANY, LLC

**Current Principal Place of Business:**

210 PARKTOWNE BLVD
7
EDGEWATER, FL 32132

**Current Mailing Address:**

210 PARKTOWNE BLVD
7
EDGEWATER, FL 32132 US

**FEI Number: 81-3558232**

**Certificate of Status Desired:** No

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

JONES, CHRISTINE WALO
210 PARKTOWNE BLVD
7
EDGEWATER, FL 32132 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: CHRISTINE JONES 02/02/2017

Electronic Signature of Registered Agent — Date

**Authorized Person(s) Detail :**

| | | | |
|---|---|---|---|
| Title | AMBR | Title | MANAGER |
| Name | JONES, CHRISTINE | Name | RAY MAYO, NATHANIEL J |
| Address | 210 PARKTOWNE BLVD. STE. 8 | Address | 210 PARKTOWNE BLVD. STE. 8 |
| City-State-Zip: | EDGEWATER FL 32132 | City-State-Zip: | EDGEWATER FL 32132 |
| Title | MANAGER | Title | AMBR |
| Name | BRUNO, STEVEN K | Name | GUADES TOBIAS, RON D |
| Address | 210 PARKTOWNE BLVD. STE. 8 | Address | 210 PARKTOWNE BLVD. STE. 8 |
| City-State-Zip: | EDGEWATER FL 32132 | City-State-Zip: | EDGEWATER FL 32132 |

*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: CHRISTINE JONES AMBR 02/02/2017

Electronic Signature of Signing Authorized Person(s) Detail — Date