

**2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M20000005896

**Entity Name:** CLEARENT, LLC

**Current Principal Place of Business:**

1625 S. CONGRESS AVE.  
SUITE:400  
DELRAY BEACH, FL 33445

**Current Mailing Address:**

1330 OLIVE BLVD.  
SUITE:200  
CREVE COEUR, MO 63141 US

**FEI Number:** 20-2775680

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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 AP  
Name JOSEPH, PAMELA  
Address 11330 OLIVE BLVD, SUITE:200  
City-State-Zip: CREVE COEUR MO 63141

Title AP  
Name VEDDER, MELINDA  
Address 11330 OLIVE BLVD, SUITE:200  
City-State-Zip: CREVE COEUR MO 63141

Title AP  
Name HOGAN, MARY KATE  
Address 11330 OLIVE BLVD, SUITE:200  
City-State-Zip: CREVE COEUR MO 63141

Title AP  
Name COLES, A. BRENT  
Address 11330 OLIVE BLVD, SUITE:200  
City-State-Zip: CREVE COEUR MO 63141

Title AP  
Name LEONARD, RYAN  
Address 11330 OLIVE BLVD, SUITE:200  
City-State-Zip: CREVE COEUR MO 63141

*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:** MARY KATE HOGAN

**AUTHORIZED PERSON**

**04/06/2022**

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

\_\_\_\_\_  
Date