

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000003235

**Entity Name:** CIREN, LLC

**Current Principal Place of Business:**

1015 ATLANTIC BLVD. #327  
ATLANTIC BEACH, FL 32233

**Current Mailing Address:**

1015 ATLANTIC BLVD. #327  
ATLANTIC BEACH, FL 32233 US

**FEI Number:** 26-4037341

**Certificate of Status Desired:** No

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

SELLERS, STEVEN E  
2846-B REMINGTON GREEN CIR.  
TALLAHASSEE, FL 32308 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 HOLZER, CURT G  
Address 1050 S MONACO PKWY  
UNIT 53  
City-State-Zip: DENVER CO 80224

Title MGRM  
Name GILBERT, TORIN J  
Address 1015 ATLANTIC BLVD. #327  
City-State-Zip: ATLANTIC BEACH FL 32233

Title MGR  
Name SMITH, ANDREW C  
Address 1228 HALIFAX CT  
City-State-Zip: TALLAHASSEE FL 32308

*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:** TORIN GILBERT

**OWNER**

**03/23/2015**

Electronic Signature of Signing Authorized Person(s) Detail

Date