

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000024397

**Entity Name:** G & M CLIPPERS LLC

**Current Principal Place of Business:**

17639 GUNN HWY,  
ODESSA, FL 33556

**Current Mailing Address:**

17633 GUNN HWY, STE. #105  
ODESSA, FL 33556 US

**FEI Number:** 36-4726408

**Certificate of Status Desired:** No

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

PATEL, GIRISH  
17639 GUNN HWY, STE. #105  
ODESSA, FL 33556 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 PATEL, GIRISH  
Address 3915 YELLOW FINCH LN  
City-State-Zip: LUTZ FL 33558

Title MGR  
Name REYNO, MARIA T  
Address 1530 VILLA CAPRI CIR. #303  
City-State-Zip: ODESSA FL 33556

*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:** GIRISH PATEL

MGD

03/17/2015

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

\_\_\_\_\_  
Date