

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000130251

**Entity Name:** CLIVE TRANSPORTATION, LLC

**Current Principal Place of Business:**

3509 SW 52ND AVE,  
APT. 207  
HOLLYWOOD, FL 33023

**Current Mailing Address:**

3509 SW 52ND AVE,  
APT. 207  
HOLLYWOOD, FL 33023

**FEI Number:** 90-1017004

**Certificate of Status Desired:** No

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

BROWN, CLIVE M  
3509 SW 52ND AVE  
APT. 207  
HOLLYWOOD, FL 33023 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  
Name BROWN, CLIVE M  
Address 3509 SW 52ND AVE, APT.207  
City-State-Zip: HOLLYWOOD FL 33023

*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:** CLIVE BROWN

**MANAGER**

**04/26/2014**

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

\_\_\_\_\_  
Date