### 2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000045120

Entity Name: RED CLAY ENTERPRISE, LLC

### **Current Principal Place of Business:**

5865 CARIBBEAN BLVD. #701 WEST PALM BEACH, FL 33407

# **Current Mailing Address:**

5865 CARIBBEAN BLVD. #701 WEST PALM BEACH, FL 33407

# FEI Number: 46-5258734

# Name and Address of Current Registered Agent:

MOORE, LORI C 5865 CARIBBEAN BLVD. #701 WEST PALM BEACH, FL 33407 US Certificate of Status Desired: No

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

#### Authorized Person(s) Detail :

|  | Title           | MGR                       | Title           | MGR                       |
|--|-----------------|---------------------------|-----------------|---------------------------|
|  | Name            | RED CLAY ENTERPRISE, LLC  | Name            | RED CLAY ENTERPRISE, LLC  |
|  | Address         | 5865 CARIBBEAN BLVD. #701 | Address         | 5865 CARIBBEAN BLVD. #701 |
|  | City-State-Zip: | WEST PALM BEACH FL 33407  | City-State-Zip: | WEST PALM BEACH FL 33407  |
|  | Title           | MGR                       | Title           | MGR                       |
|  | Name            | RED CLAY ENTERPRISE, LLC  | Name            | RED CLAY ENTERPRISE, LLC  |
|  | Address         | 5865 CARIBBEAN BLVD. #701 | Address         | 5865 CARIBBEAN BLVD. #701 |
|  | City-State-Zip: | WEST PLM BEACH FL 33407   | City-State-Zip: | WEST PALM BEACH FL 33407  |
|  | Title           | MGR                       | Title           | MGR                       |
|  | Name            | RED CLAY ENTERPRISE, LLC  | Name            | RED CLAY ENTERPRISE, LLC  |
|  | Address         | 5865 CARIBBEAN BLVD. #701 | Address         | 5865 CARIBBEAN BLVD. #701 |
|  | City-State-Zip: | WEST PALM BEACH FL 33407  | City-State-Zip: | WEST PALM BEACH FL 33407  |
|  |                 |                           |                 |                           |

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: LORI MOORE

REGISTER AGENT

04/26/2016

Date

Electronic Signature of Signing Authorized Person(s) Detail

# FILED Apr 26, 2016 Secretary of State CC9210663071