

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000166046

**Entity Name:** CLP FLORIDA LLC

**Current Principal Place of Business:**

329 SE 7TH AVENUE  
DEERFIELD BEACH, FL 33441

**Current Mailing Address:**

100 NORTH BROADWAY  
14TH FLOOR  
ST. LOUIS, MO 63102 US

**FEI Number:** 81-5180766

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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 AMBR  
Name C&L FAMILY TRUST DTD 09-06-2016  
Address C/O 100 NORTH BROADWAY, 14TH FLOOR  
City-State-Zip: ST. LOUIS MO 63102

Title MGR  
Name CHEN, HAN  
Address C/O 100 NORTH BROADWAY, 14TH FLOOR  
City-State-Zip: ST. LOUIS MO 63102

Title MGR  
Name LIU, XIAOMEI MICHELLE  
Address C/O 100 NORTH BROADWAY, 14TH FLOOR  
City-State-Zip: ST. LOUIS MO 63102

*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:** HAN CHEN

**MANAGER**

**02/22/2018**

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

\_\_\_\_\_  
Date