

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000208324

**Entity Name:** QUARTER CLIP LLC

**Current Principal Place of Business:**

1446 TRAVERTINE TERRACE  
SANFORD, FL 32771

**Current Mailing Address:**

1446 TRAVERTINE TERRACE  
SANFORD, FL 32771 US

**FEI Number:** 85-0571574

**Certificate of Status Desired:** No

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

PORTEUS, ANDREW  
1446 TRAVERTINE TERRACE  
SANFORD, FL 32771 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	Title	MGR
Name	PORTEUS, ANDREW	Name	DEARING, MICHAEL W
Address	1446 TRAVERTINE TERRACE	Address	1714 REDSTONE MANOR DR
City-State-Zip:	SANFORD FL 32771	City-State-Zip:	SPRING TX 77379

*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:** ANDREW PORTEUS

**MANAGER**

**03/16/2021**

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

\_\_\_\_\_ Date