		Certificate of Status Desired. No		
Name and Address of Current Registered Agent:				
DUCLAIR, BENOIT 16667 MURCOTT BOULEVARD LOXAHATCHEE, FL 33470 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:	BENOIT DUCLAIR			03/05/2017
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MGRM	Title	MGRM	
Name	DUCLAIR, BENOIT	Name	DUCLAIR, MARIE	

Address

City-State-Zip:

that my name appears above, or on an attachment with all other like empowered. 03/05/2017 MGRM

SIGNATURE: BENOIT DUCLAIR

Electronic Signature of Signing Authorized Person(s) Detail

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000089668

Entity Name: 1200 WEST BLUE HERON, LLC

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

16667 MURCOTT BOULEVARD LOXAHATCHEE, FL 33470

# **Current Mailing Address:**

16667 MURCOTT BOULEVARD LOXAHATCHEE. FL 33470 US

# FEI Number: 59-3823118

### Na

16667 MURCOTT BOULEVARD

City-State-Zip: LOXAHATCHEE FL 33470

Address

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

Mar 05, 2017 Secretary of State CC3344982235

FILED

Certificate of Status Desired: No

16667 MURCOTT BOULEVARD

LOXAHATCHEE FL 33470

Date