

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000002747

**Entity Name:** BLUE LAGOON OF FLORIDA KEYS LLC

**Current Principal Place of Business:**

% HANNA RABENSEIFNER ESQ.  
905 BRICKELL BAY DRIVE, #730  
MIAMI, FL 33131

**Current Mailing Address:**

3675 SEASIDE DR.  
APT. 339  
KEY WEST, FL 33040

**FEI Number:** 80-0525752

**Certificate of Status Desired:** No

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

RABENSEIFNER, HANNA  
905 BRICKELL BAY DRIVE, #730  
MIAMI, FL 33131 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 CPO  
Name LENGYEL KOUKERJINIAN, IZABELLA  
Address 3675 SEASIDE DR. APT. 339  
City-State-Zip: KEY WEST FL 33040

*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:** IZABELLA LENGYEL KOUKERJINIAN

**CEO**

**04/22/2015**

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

\_\_\_\_\_  
Date