

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000048112

**Entity Name:** BLUEOCEANVILLAS LLC

**Current Principal Place of Business:**

234 SARATOGA DR  
ACWORTH, GA 30102

**Current Mailing Address:**

234 SARATOGA DR  
ACWORTH, GA 30102 US

**FEI Number:** 80-0589934

**Certificate of Status Desired:** No

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

VAN DER DRIFT, SOPHIA M  
234 SARATOGA DR  
ACWORTH, FL 30102 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	MGRM	Title	MGR
Name	VAN DER DRIFT, SOPHIA M	Name	DETIGER, RONALD H
Address	234 SARATOGA DR	Address	234 SARATOGA DR
City-State-Zip:	ACWORTH GA 30102	City-State-Zip:	ACWORTH GA 30102

*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:** SOPHIA VAN DER DRIFT

**MGRM**

**01/18/2024**

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

\_\_\_\_\_  
Date