#### 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000109979

Entity Name: BLUE TEAM RESTORATION, LLC

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

1395 NW 17TH AVE. 113 DELRAY BEACH,FL 33445

## **Current Mailing Address:**

1395 NW 17TH AVE. 113 DELRAY BEACH , FL 33445 US

## FEI Number: 27-3737654

## Name and Address of Current Registered Agent:

BRYAN, MEKLIR 1395 NW 17TH AVE. 113 DELRAY BEACH , FL 33445 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

#### Authorized Person(s) Detail :

Title	MGRM	Title	MRRM
Name	MEKLIR, BRYAN A	Name	MEKLIR, KATIE C
Address	405 NW 12TH STREET	Address	405 NW 12TH STREET
City-State-Zip:	DELRAY BEACH FL 33444	City-State-Zip:	DELRAY BEACH FL 33444

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.

OWNER

## SIGNATURE: BRYAN MEKLIR

Electronic Signature of Signing Authorized Person(s) Detail

# FILED Jan 10, 2017 Secretary of State CC7098183895

Certificate of Status Desired: No

Date

01/10/2017 Date