

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000111322

Entity Name: BLOWER WIND, LLC

Current Principal Place of Business:

1111 BRICKELL AVENUE
SUITE 2802
MIAMI, FL 33131

Current Mailing Address:

1111 BRICKELL AVENUE
SUITE 2802
MIAMI, FL 33131

FEI Number: 80-0682059

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HALPERN RODRIGUEZ, LLP
800 DOUGLAS ROAD
SUITE 880
CORAL GABLES, FL 33134 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
Name BAERT, CAROLINA
Address 1111 BRICKELL AVENUE, SUITE 2802
City-State-Zip: MIAMI FL 33131

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: CAROLINA BAERT

MGR

03/12/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date