## 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000021979

Entity Name: BCRX2, LLC

**Current Principal Place of Business:** 

210 SOUTH PALM STREET PORT ST. JOE. FL 32456

**Current Mailing Address:** 

210 SOUTH PALM STREET PORT ST. JOE. FL 32456 US

FEI Number: 45-4661773 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RADCLIFF, BARBARA 210 SOUTH PALM STREET PORT ST. JOE, FL 32456 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

**FILED** Feb 26, 2018

**Secretary of State** 

CC2452187432

Authorized Person(s) Detail:

Title MGRM Title **MGRM** 

Address

RADCLIFF, BARBARA Name

Name RADCLIFF, CHARLES

210 SOUTH PALM STREET Address

210 SOUTH PALM STREET

City-State-Zip: PORT ST. JOE FL 32456

City-State-Zip: PORT ST. JOE FL 32456

Title **MGRM**  Title **MGRM** 

Name REID, BILL Name REID, CARYN

Address 107 SEA PINES LANE Address 107 SEA PINES LANE

City-State-Zip: PORT ST. JOE FL 32456

PORT ST. JOE FL 32456 City-State-Zip:

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: BARBARA RADCLIFF

MEMBER MANAGER

02/26/2018