

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000119057

**Entity Name:** BLACKPOINT VENTURES LLC

**Current Principal Place of Business:**

16501 SW 89 AVE  
PALMETTO BAY, FL 33157

**Current Mailing Address:**

16501 SW 89 AVE  
PALMETTO BAY, FL 33157 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

MELO, PETER  
16501 SW 89 AVE  
PALMETTO BAY, FL 33157 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  
Name MELO, PETER  
Address 16501 SW 89 AVE  
City-State-Zip: PALMETTO BAY FL 33157

*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:** PETER MELO

MGRM

04/25/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date