

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000132515

Entity Name: BYRD FAMILY BLESSING LLC

Current Principal Place of Business:

1939 SWEET OLIVE COURT
JACKSONVILLE, FL 32218

Current Mailing Address:

1939 SWEET OLIVE COURT
JACKSONVILLE, FL 32218

FEI Number: 47-2431541

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CONNER, CYNTHIA B
1939 SWEET OLIVE COURT
JACKSONVILLE, FL 32218 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 CONNER, CYNTHIA B
Address 1939 SWEET OLIVE COURT
City-State-Zip: JACKSONVILLE FL 32218

Title MGR
Name WALKER, SHERLYN B
Address 4335 ALTA DRIVE APT 3212
City-State-Zip: SUWANEE GA 30024

Title MGR
Name BLOUNT, YOLANDA B
Address 8295 SHERMAN BYRD LANE
City-State-Zip: WINDSOR VA 23487

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: CYNTHIA BYRD CONNER

MGR

03/27/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date