

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000140747

**Entity Name:** OMICRON BLUE, LLC

**Current Principal Place of Business:**

7385 GALLOWAY ROAD,  
SUITE 200  
MIAMI, FL 33173

**Current Mailing Address:**

7385 GALLOWAY ROAD,  
SUITE 200  
MIAMI, FL 33173 US

**FEI Number:** 81-3478130

**Certificate of Status Desired:** No

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

MULLER, CHARLES E II  
7385 GALLOWAY ROAD  
SUITE 200  
MIAMI, FL 33173 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            AUTHORIZED MEMBER  
Name            CRESCENT TIDE HOLDINGS, LLC  
Address        807 W. MORSE BLVD  
                  SUITE 101  
City-State-Zip: WINTER PARK FL 32789

*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:** CRESCENT TIDE HOLDINGS, LLC BY T.S. MILLER    AMBR

04/06/2017

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date