

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000210639

**Entity Name:** BLU DISTRIBUTOR, LLC

**Current Principal Place of Business:**

951 BRICKELL AVE NO 2305  
MIAMI, FL 33131

**Current Mailing Address:**

951 BRICKELL AVE NO 2305  
MIAMI, FL 33131

**FEI Number: 81-4752366**

**Certificate of Status Desired: No**

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

SANCHEZ, ALEJANDRO C  
951 BRICKELL AVE NO 2305  
MIAMI, FL 33131 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	AMGR	Title	AMGR
Name	SANCHEZ, ALEJANDRO C	Name	NUNEZ, CAROLINA M
Address	951 BRICKELL AVE NO 2305	Address	951 BRICKELL AVE NO 2305
City-State-Zip:	MIAMI FL 33131	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: ALEJANDRO SANCHEZ**

**MANAGER**

**03/12/2020**

Electronic Signature of Signing Authorized Person(s) Detail

Date