

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000393901

**Entity Name:** BLUE CHANNEL VENTURES, LLC

**Current Principal Place of Business:**

444 NW 1ST AVENUE  
APT #503  
FORT LAUDERDALE, FL 33301

**Current Mailing Address:**

444 NW 1ST AVENUE  
APT #503  
FORT LAUDERDALE, FL 33301 US

**FEI Number:** 85-4359999

**Certificate of Status Desired:** No

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

BYRNE, THOMAS  
444 NW 1ST AVENUE  
APT #503  
FORT LAUDERDALE, FL 33301 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 AMBR  
Name BYRNE, THOMAS  
Address 444 NW 1ST AVENUE, APT #503  
City-State-Zip: FORT LAUDERDALE FL 33301

Title AMBR  
Name LYNN, JACK  
Address 741 NW 100 TERRACE  
City-State-Zip: PLANTATION FL 33324

Title AMBR  
Name STUDNIK, SHANI DR.  
Address 352 WALNUT STREET  
City-State-Zip: HOLLYWOOD FL 33019

*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:** JACK LYNN

MEMBER

07/27/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date