2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Sep 02, 2001 08:00 AM
Secretary of State

DOCUMENT # **L00000004860**

1. Entity Name
BLUE LINE FINE HOMES, LLC

Principal Place of Business	Mailing Address
14458 CYPRESS ISLAND CIR.	14458 CYPRESS ISLAND CIR.
PALM BEACH GARDENS FL 33410	PALM BEACH GARDENS FL 33410

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1030014
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

CHASEN VICTORIA A
24 SOMERSET DRIVE
PALM BEACH GARDENS FL
33418 US

7. Name and Address of New Registered Agent

Name
CHASEN VICTORIA A
Street Address (P.O. Box Number is Not Acceptable)
14458 CYPRESS ISLAND CIR.
City
PALM BEACH GARDENS **FL** Zip Code 33410

8. 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 VICTORIA A. CHASEN 09/02/2001
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $50.00
Make Check Payable to Department of State

9. MANAGING MEMBERS/MEMBERS			10. ADDITIONS/CHANGES		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CHASEN DONALD LMGR 14458 CYPRESS ISLAND CIRCLE PALM BEACH GARDENS FL 33410	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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CR2E083 (11/00)

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 608, Florida Statutes.

SIGNATURE: Donald L. Chasen Mgr 09/02/2001
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE Date Daytime Phone #