

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000084538

Entity Name: BELAIRE, LLC

Current Principal Place of Business:

11390 TWELVE OAKS WAY, SUITE 520
NORTH PALM BEACH, FL 33408

Current Mailing Address:

11390 TWELVE OAKS WAY, SUITE520
NORTH PALM BEACH, FL 33408

FEI Number: 37-4640709

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

POWELL, KAREN M
11390 TWELVE OAKS WAY, SUITE520
NORTH PALM BEACH, FL 33408 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 MGRM
Name POWELL, KAREN M
Address 11390 TWELVE OAKS WAY, SUITE 520

City-State-Zip: NORTH PALM BEACH FL 33408

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: KAREN POWELL

MGRM

03/25/2014

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date