

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000024268

Entity Name: BLUE RIDGE DREAMS, LLC

Current Principal Place of Business:

440 SOUTH ANDREWS AVE
FORT LAUDERDALE, FL 33301

Current Mailing Address:

440 SOUTH ANDREWS AVE
FORT LAUDERDALE, FL 33301 US

FEI Number: 41-2239712

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WALDMAN, ALEIDA O
440 SOUTH ANDREWS AVE
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 MGRM
Name WALDMAN, ALEIDA O
Address 440 SOUTH ANDREWS AVE
City-State-Zip: FORT LAUDERDALE FL 33301

Title MGRM
Name BERGERON, RONALD MSR.
Address 19612 SW 69TH PLACE
City-State-Zip: PEMBROKE PINES FL 33332

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: ALEIDA O WALDMAN

MGRM

04/18/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date