## **2021 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

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: ALEIDA O WALDMAN 03/23/2021

Electronic Signature of Registered Agent

Date

FILED Mar 23, 2021

**Secretary of State** 

4534167789CR

Authorized Person(s) Detail:

Title MGRM Title MGRM

NameWALDMAN, ALEIDA ONameBERGERON, RONALD MSR.Address440 SOUTH ANDREWS AVEAddress19612 SW 69TH PLACECity-State-Zip:FORT LAUDERDALE FL 33301City-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

Electronic Signature of Signing Authorized Person(s) Detail

MGR

03/23/2021