

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000077999

**Entity Name:** BLUE COVE SOLUTIONS LLC

**Current Principal Place of Business:**

9120 SW 51 STREET  
MIAMI, FL 33165

**Current Mailing Address:**

9120 SW 51 STREET  
MIAMI, FL 33165 US

**FEI Number:** 45-5483225

**Certificate of Status Desired:** Yes

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

PLATA, CHARLES  
9120 SW 51 STREET  
MIAMI, FL 33165 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 PLATA, CHARLES  
Address 9120 SW 51 STREET  
City-State-Zip: MIAMI FL 33165

*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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** CHARLES PLATA

MGRM

06/18/2013

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date