

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000105593

**Entity Name:** BLU SKYE CAPITAL, LLC

**Current Principal Place of Business:**

1670 JAN LAN BLVD  
ST CLOUD, FL 34772

**Current Mailing Address:**

PO BOX 700838  
ST CLOUD, FL 34770

**FEI Number:** 46-0762482

**Certificate of Status Desired:** No

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

WILSON, ABRAHAM  
1670 JAN LAN BLVD  
ST CLOUD, FL 34772 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 WILSON, ABRAHAM  
Address 1670 JAN LAN BLVD  
City-State-Zip: ST CLOUD FL 34772

Title MGRM  
Name WILSON, MICHELE  
Address 1670 JAN LAN BLVD  
City-State-Zip: ST CLOUD FL 34772

Title MGR  
Name BOLGER, ROLAND  
Address 1798 BARTON DR.  
City-State-Zip: FAIRFIELD CA 94534

*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:** ABRAHAM WILSON

MGRM

04/12/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date