## 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000008236

Entity Name: 1555 BLUE POINT, LLC.

**Current Principal Place of Business:** 

1400 BLUE POINT AVE APT 204

NAPLES, FL 34102

**Current Mailing Address:** 

1400 BLUE POINT AVE APT204 NAPLES, FL 34102

FEI Number: 46-1845667 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHANDOK, SURINDER S 1400 BLUE POINT AVE APT204 NAPLES, FL 34102 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

FILED Mar 16, 2017

**Secretary of State** 

CC8644981383

Authorized Person(s) Detail:

Title MGRM

MGRM Title MGR

Name CHANDOK, SURINDER S Name CHANDOK, TRIPAT

Address 1400 BLUE POINT AVE APT 204 Address 295 BARTON NORTH DRIVE

City-State-Zip: NAPLES FL 34102 City-State-Zip: ANN ARBOR MI 48105

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.

Electronic Signature of Signing Authorized Person(s) Detail