## 2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000030365

Entity Name: BLUE RIDGE RECOVERY LLC

**Current Principal Place of Business:** 

2015 CR 596 NEVADA, TX 75173

**Current Mailing Address:** 

**PO BOX 81** 

JOSEPHINE, TX 75164 US

FEI Number: 46-2143485 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

FLORIDA REGISTERED AGENT 2975 BEE RIDGE ROAD SUITE C3 SARASOTA, FL 34239 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: MICHAEL ANGELO REP. FL REGISTERED AGENT 04/16/2025

Electronic Signature of Registered Agent

Date

FILED Apr 16, 2025

**Secretary of State** 

7097548114CC

Authorized Person(s) Detail:

Title AMBR

Name WAGNER, DEBBIE

Address PO BOX 81

City-State-Zip: JOSEPHINE TX 75164

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: DEBBIE WAGNER OWNER 04/16/2025