

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000123509

**Entity Name:** SAPPHIRE BLUE PROPERTIES LLC

**Current Principal Place of Business:**

6262 BIRD ROAD  
3-K  
MIAMI, FL 33155

**Current Mailing Address:**

6262 BIRD ROAD  
3-K  
MIAMI, FL 33155

**FEI Number:** 30-0828223

**Certificate of Status Desired:** No

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

ALO, MARIA L  
6262 BIRD ROAD  
3-K  
MIAMI, FL 33155 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 AUTHORIZED REPRESENTATIVE  
Name ALO, MARIA L ESQ.  
Address 6262 BIRD ROAD  
3-K  
City-State-Zip: MIAMI FL 33155

Title MANAGER, AUTHORIZED REPRESENTATIVE  
Name CABIELLES, MANUEL  
Address P.O. BOX 561613  
City-State-Zip: MIAMI FL 33256-1613

Title MANAGER, AUTHORIZED REPRESENTATIVE  
Name CABIELLES, ROSARIO  
Address P.O. BOX 561613  
City-State-Zip: MIAMI FL 33256-1613

*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: MARIA L. ALO, ESQ.

AUTHORIZED REPRESENTATIVE

03/03/2016

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

\_\_\_\_\_  
Date