## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000159058

Entity Name: BLUE RING STENCILS LLC

**Current Principal Place of Business:** 

715 NORTH DRIVE SUITE C WEST MELBOURNE, FL 32934

**Current Mailing Address:** 

140 MT. HOLLY BY-PASS, UNIT 10 LUMBERTON. NJ 08048

FEI Number: 82-1956577 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REGISTERED AGENTS INC. 3030 N. ROCKY POINT DR. STE 150A TAMPA, FL 32934 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 Feb 12, 2019

**Secretary of State** 

4802676862CC

Authorized Person(s) Detail:

Title MGR Title MGRM

 Name
 OLSON, LISA
 Name
 SCIMECA, MICHAEL

 Address
 1309 N 17TH AVE
 Address
 1309 N 17TH AVE

 City-State-Zip:
 GREELEY CO 80631
 City-State-Zip:
 GREELEY CO 80631

Title MGRM

Name COX, FREDERICK

Address 140 MT. HOLLY BY-PASS, UNIT 10

City-State-Zip: LUMBERTON NJ 08048

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: LISA OLSON MANAGER 02/12/2019