## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L02000018200

Entity Name: 3 - ARM - Z LLC

Address:

6900 DWIGHT RD

City-St-Zip: WEST PALM BEACH, FL 33411

FILED Jun 03, 2009 Secretary of State

Current Principal Place of Business:		New Principal Place of E	New Principal Place of Business:	
4609 HUNTING TRAIL LAKE WORTH, FL 33467			1556 STONEHAVEN ESTATES DR. WEST PALM BEACH, FL 33411	
Current Mailing Address:		New Mailing Address:	New Mailing Address:	
4609 HUNTING TRAIL LAKE WORTH, FL 33467			1556 STONEHAVEN ESTATES DR. WEST PALM BEACH, FL 33411	
In accordan	: 42-1560775 FEI Number Applied For ( ) ace with s. 607.193(2)(b), F.S., the limited liability co	• •	Certificate of Status Desired ( )	
Name and	d Address of Current Registered Agent:	Name and Address of No	ew Registered Agent:	
MCDEAVITT, DAVID P 4609 HUNTING TRAIL LAKE WORTH, FL 33467 US			HOGUE, JEFFREY M 1556 STONEHAVEN ESTATES DR. WEST PALM BEACH, FL 33411 US	
	e named entity submits this statement for the e of Florida.	purpose of changing its registered of	fice or registered agent, or both	
SIGNATUI	RE: JEFFREY M. HOGUE		06/03/2009	
	Electronic Signature of Registered A	ent	Date	
MANAGING MEMBERS/MANAGERS:		ADDITIONS/CHANGES:	ADDITIONS/CHANGES:	
Title: Name: Address: City-St-Zip:	MGR ( ) Delete ARMSEY, DONALD L 524 WESTWOOD CIRCLE WEST PALM BEACH, FL 33411	Title: ( ) ! Name: Address: City-St-Zip:	Change ()Addition	
Title: Name: Address: City-St-Zip:	MGR ( ) Delete MCDEAVITT, DAVID 4609 HUNTING TRAIL LAKE WORTH, FL 33467	Title: ( ) ! Name: Address: City-St-Zip:	Change ( ) Addition	
Title: Name: Address: City-St-Zip:	PRES ( ) Delete HOGUE, JEFFREY 1556 STONE RIVER ESTATE DR WEST PALM BEACH, FL 33411	Title: ( ) ! Name: Address: City-St-Zip:	Change ()Addition	
Title: Name:	MGR ( ) Delete BATES, A O'NEAL	Title: ( ) Name:	Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

Address:

City-St-Zip:

SIGNATURE: JEFFREY HOGUE PRES 06/03/2009