2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# L04000066899

Entity Name: THREE LG'S, LLC

Current Principal Place of Business:

16500 COLLINS AVENUE #208
SUNNY ISLES, FL 33160

New Principal Place of Business:

Current Mailing Address:

1 SE 3RD AVENUE
SUITE 2950
MIAMI, FL 33131

New Mailing Address:

FEI Number: 20-1631715 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

DANIELS, NICHOLAS M ESQ.
ONE SE 3RD AVENUE
SUITE 2950
MIAMI, FL 33131 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title:	MM	( ) Delete
Name:	LILI CARISSA GIANGRANDI ROIG	
Address:	16500 COLLINS AVE #208	
City-St-Zip:	SUNNY ISLES, FL 33160	
Title:	MM	( ) Delete
Name:	LUCIANA CARLA GIANGRANDI ROIG	
Address:	16500 COLLINS AVE #208	
City-St-Zip:	SUNNY ISLES, FL 33160	
Title:	MM	( ) Delete
Name:	LISSANDRA MARIANNA GIANGRANDI ROIG	
Address:	16500 COLLINS AVE #208	
City-St-Zip:	SUNNY ISLES, FL 33160	

ADDITIONS/CHANGES:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

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.

SIGNATURE: LILI CARISSA GIANGRANDI MGR 04/30/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date