

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000073661

Entity Name: 3 WAVES LLC

FILED  
Mar 20, 2010  
Secretary of State

**Current Principal Place of Business:**

6268 KAAWA STREET  
A  
KAILUA, HI 96734 US

**New Principal Place of Business:**

5949 BROKEN ARROW DR. W.  
JACKSONVILLE, FL 32244 US

**Current Mailing Address:**

PSC 558 BOX 3558  
FPO AP 96375, XX

**New Mailing Address:**

PSC 558 BOX 3558  
FPO, AP 96375 US

FEI Number: 20-1750292

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FORM-A-CORP LLC  
4400 PGA BLVD., SUITE 900  
PALM BEACH GARDENS, FL 33410 US

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

FORM-A-CORP LLC  
4400 PGA BLVD.  
SUITE 900  
PALM BEACH GARDENS, FL 33410 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: ADRIAN BRION

03/20/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: HIGHTOWER, JEFFERY A  
Address: PSC 558 BOX 3558  
City-St-Zip: FPO, AP 96375 US

I hereby 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: JEFFERY A HIGHTOWER

MGRM

03/20/2010

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