

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000018390

**Entity Name:** 3RD DEVIL ONLINE, LLC

**Current Principal Place of Business:**

1246 WOOD DUCK CT.  
SAINT JOHNS, FL 32259

**Current Mailing Address:**

1246 WOOD DUCK CT.  
SAINT JOHNS, FL 32259

**FEI Number:** 20-4248716

**Certificate of Status Desired:** Yes

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

NIELSEN, KATHRYN L  
1246 WOOD DUCK CT.  
SAINT JOHNS, FL 32259 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           | MGR                  | Title           | MGRM                 |
| Name            | NIELSEN, KATHRYN L   | Name            | NIELSEN, KIRK B      |
| Address         | 1246 WOOD DUCK CT.   | Address         | 1246 WOOD DUCK CT.   |
| City-State-Zip: | SAINT JOHNS FL 32259 | City-State-Zip: | SAINT JOHNS FL 32259 |

*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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** KATHRYN L. NIELSEN

**PRESIDENT**

**01/10/2013**

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

\_\_\_\_\_  
Date