

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000089574

**Entity Name:** 3TIS, LLC.

**Current Principal Place of Business:**

1715 HODGES BLVD. APT 3004  
JACKSONVILLE, FL 32224

**Current Mailing Address:**

1715 HODGES BLVD. APT 3004  
JACKSONVILLE, FL 32224 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

SHOEMAKER, TRACIE  
1715 HODGES BLVD. APT 3004  
JACKSONVILLE , FL 32224 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 MGRM  
Name SHOEMAKER, TRACIE  
Address 1715 HODGES BLVD. APT 3004  
City-State-Zip: JACKSONVILLE FL 32224

Title MGRM  
Name SHOEMAKER, TYLER  
Address 589 11 AVE SOUTH  
City-State-Zip: JACKSONVILLE BEACH FL 32250

*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:** TRACIE SHOEMAKER

MGRM

02/09/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date