

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000128200

Entity Name: NEW WAVE POOL CARE, LLC

Current Principal Place of Business:

3020 NE 41 TERR
254
HOMESTEAD, FL 33033

Current Mailing Address:

3020 NE 41 TERR
254
HOMESTEAD, FL 33033 US

FEI Number: 46-1145508

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

AMERICAN SAFETY COUNCIL, INC.
5125 ADANSON ST.
SUITE 500
ORLANDO, FL 32804 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: DENISE BARTON

04/20/2016

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title COO
Name MORALES, CARLOS
Address 3020 NE 41 TERR
 254
City-State-Zip: HOMESTEAD FL 33033

Title AUTHORIZED MEMBER
Name MORALES, JENNIFER
Address 3020 NE 41 TERR
 254
City-State-Zip: HOMESTEAD FL 33033

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

SIGNATURE: JENNIFER MORALES

AUTHORIZED MEMBER

04/20/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date