

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000032500

FILED  
Aug 05, 2008  
Secretary of State

Entity Name: MS THREE LLC

**Current Principal Place of Business:**

15912 SW 92 AVE  
PALMETTO BAY, FL 33157

**New Principal Place of Business:**

**Current Mailing Address:**

15912 SW 92 AVE  
PALMETTO BAY, FL 33157

**New Mailing Address:**

FEI Number: 35-2294997      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

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

ARTILES, AIMEE  
15912 SW 92 AVE  
PALMETTO BAY, FL 33157      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

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM      ( ) Delete  
Name: SONTAG, MICHAEL W  
Address: 15912 SW 92 AVE  
City-St-Zip: PALMETTO BAY, FL 33157

Title: MGR      ( ) Delete  
Name: SONTAG, NOELLE  
Address: 15912 SW 92 AVE  
City-St-Zip: PALMETTO BAY, FL 33157

**ADDITIONS/CHANGES:**

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: MICHEAL W SONTAG

PRES

08/05/2008

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