

**2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L07000076064

**FILED  
Apr 24, 2012  
Secretary of State**

**Entity Name:** BLUWAVE SUPPORT SOLUTIONS, LLC

**Current Principal Place of Business:**

1609 CHERRY RIDGE DRIVE  
HEATHROW, FL 32746

**New Principal Place of Business:**

**Current Mailing Address:**

1609 CHERRY RIDGE DRIVE  
HEATHROW, FL 32746

**New Mailing Address:**

FEI Number: 26-0621117

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JEFFRIES, DAVID M  
1227 N. FRANKLIN STREET  
TAMPA, FL 33602 US

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

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  
Name: ADAMS, MICHAEL R MGRM  
Address: 1609 CHERRY RIDGE DRIVE  
City-St-Zip: HEATHROW, FL 32746

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: MICHAEL R ADAMS

MGMR

04/24/2012

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