

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000004287

Entity Name: COMMFUNCTION, LLC

**FILED**  
**Apr 30, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

3867 SE EVANS TERRACE  
STUART, FL 34997 US

**New Principal Place of Business:**

3130 SE GRAN PARK WAY  
STUART, FL 34997 US

**Current Mailing Address:**

3867 SE EVANS TERRACE  
STUART, FL 34997 US

**New Mailing Address:**

3130 SE GRAN PARK WAY  
STUART, FL 34997 US

FEI Number: 26-2001395

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WIRED WATERS INC.  
3867 SE EVANS TERRACE  
STUART, FL 34997 US

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

WIRED WATERS INC.  
3130 SE GRAN PARK WAY  
STUART, FL 34997 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:

04/30/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: WIRED WATERS , INC  
Address: 3130 SE GRAN PARK WAY  
City-St-Zip: STUART, FL 34997 US

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: SEAN BARRETT

CEO

04/30/2010

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