## 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

## DOCUMENT# L08000072470

Entity Name: S3 ENVIRONMENTAL SERVICES LLC

SANTA ROSA BEACH, FL 32459

City-St-Zip:

FILED Feb 20, 2009 Secretary of State

| Current P                                   | rincipal Place   | of Business:                 | New Principal Place                         | New Principal Place of Business:          |  |
|---|--|------------------------------|---|---|--|
|   | NOLIA CREEK<br>DSA BEACH, F                              |                              |   |   |  |
| Current Mailing Address:                    |  |                              | New Mailing Address:                        |   |  |
| 1112 CAS<br>GROVETO                         | TLE RD.<br>DWN, GA 308                                   | 13                           |   |   |  |
| FEI Number                                  | : 26-3072641   | FEI Number Applied For ( )   | FEI Number Not Applicable ( )               | Certificate of Status Desired ( )         |  |
| Name and                                    | Address of C   | urrent Registered Agent:     | Name and Address                            | Name and Address of New Registered Agent: |  |
| 317 MÁGI<br>SANTA RO<br>The above           | e of Florida.  | FL 32459 US                  | purpose of changing its registere           | ed office or registered agent, or both    |  |
|   | Electror   | ic Signature of Registered A | gent  | Date                                      |  |
| MANAGING                                    | MEMBERS/MANA   | AGERS:                       | ADDITIONS/CHANGES:                          |   |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | MGRM ()<br>SMITH, KENDA<br>1112 CASTLE I<br>GROVETOWN,   | RD                           | Title:<br>Name:<br>Address:<br>City-St-Zip: | () Change () Addition                     |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip: | MGRM ( )<br>SMITH, KEITH<br>284 CARTER S<br>BLOUNTSVILLI |                              | Title:<br>Name:<br>Address:<br>City-St-Zip: | ( ) Change ( ) Addition                   |  |
| Title:<br>Name:<br>Address:                 | MGRM ( )<br>SMITH, KRISTO<br>317 MAGNOLIA                |                              | Title:<br>Name:<br>Address:                 | ( ) Change ( ) Addition                   |  |

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.

City-St-Zip:

SIGNATURE: KRIS SMITH MR 02/20/2009