

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000115296

**FILED**  
**Jul 05, 2012**  
**Secretary of State**

**Entity Name:** THREE POINTS PACKAGING, LLC

**Current Principal Place of Business:**

1363 NW 155TH DRIVE  
MIAMI GARDENS, FL 33169

**New Principal Place of Business:**

3505 N.W. 123RD STREET  
MIAMI, FL 33167 MD

**Current Mailing Address:**

1363 NW 155TH DRIVE  
MIAMI GARDENS, FL 33169

**New Mailing Address:**

3505 N.W. 123RD STREET  
MIAMI, FL 33167 MD

**FEI Number:** 45-3607804

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

BOSH, NOEL  
1363 NW 155TH DRIVE  
MIAMI GARDENS, FL 33169 US

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

BOSH, NOEL  
3505 N.W. 123RD STREET  
MIAMI, FL 33167 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: NOEL BOSH

07/05/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: PRES  
Name: BOSH, NOEL  
Address: 3505 N.W. 123RD STREET  
City-St-Zip: MIAMI, FL 33167 MD

Title: GM  
Name: ANDRADE, MAXINE  
Address: 3505 N.W. 123RD STREET  
City-St-Zip: MIAMI, FL 33167

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: NOEL BOSH

PRES

07/05/2012

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