

**2017 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L07000113390

**Entity Name:** 360 BLUE, LLC

**Current Principal Place of Business:**

790 N COUNTY HWY 393  
UNIT 3B  
SANTA ROSA BEACH, 32459

**Current Mailing Address:**

790 N COUNTY HWY 393  
UNIT 3B  
SANTA ROSA BEACH, FL 32459 US

**FEI Number:** 26-1381570

**Certificate of Status Desired:** No

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

SPRENKLE, JASON B  
790 N COUNTY HWY 393  
UNIT 3B  
SANTA ROSA BEACH, FL 32459 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

**Authorized Person(s) Detail :**

Title MGRM  
Name JEREMY SPRENKLE, INC.  
Address 327 CALLE ESCADA  
City-State-Zip: SANTA ROSA BEACH FL 32459

Title MGRM  
Name JASON B SPRENKLE, INC.  
Address 437 CAPTAINS CIRCLE  
City-State-Zip: DESTIN FL 32541

Title CEO  
Name HAMM, ASHLEY E  
Address 1215 E PT WASHINGTON DR  
City-State-Zip: SANTA ROSA BEACH FL 32459

Title CFO  
Name VICKERS, JANICE (NISHA)  
Address 1181 THOMPSON ROAD  
City-State-Zip: SANTA ROSA BEACH FL 32459

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** JASON SPRENKLE

MGRM

05/17/2017

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail Date