

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000044604

**Entity Name:** WOW 3D GROUP, LLC

**Current Principal Place of Business:**

2220 SUTHERLAND AVE  
C/O DOUG YOAKLEY  
KNOXVILLE, TN 37919

**Current Mailing Address:**

2220 SUTHERLAND AVE  
C/O DOUG YOAKLEY  
KNOXVILLE, TN 37919 US

**FEI Number:** 26-1928555

**Certificate of Status Desired:** Yes

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

YOAKLEY, DOUGLAS A  
2963 GULF TO BAY BLVD  
SUITE 267  
CLEARWATER, FL 33759 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            PRESIDENT  
Name            NEWMAN, STEVE  
Address        121 N. CONCORD ST.  
City-State-Zip: KNOXVILLE TN 37919

Title            MGR  
Name            YOAKLEY, DOUGLAS A  
Address        2005 PARTRIDGE RUN  
City-State-Zip: KNOXVILLE TN 37919

Title            MGR  
Name            OWENS, BRIEN  
Address        121 N. CONCORD ST.  
City-State-Zip: KNOXVILLE TN 37919

*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:** DOUGLAS A. YOAKLEY

**MANAGER**

**04/22/2014**

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

\_\_\_\_\_  
Date