

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000097375

**Entity Name:** GREEN WAVE INNOVATIVE SOLUTIONS, LLC**Current Principal Place of Business:**833 SW 54TH LANE  
CAPE CORAL, FL 33914**Current Mailing Address:**833 SW 54TH LANE  
CAPE CORAL, FL 33914 US**FEI Number:** 46-0771697**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BARBARA M. PIZZOLATO, P.A.  
12751 NEW BRITTANY BLVD.  
SUITE 402  
FORT MYERS, FL 33907 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:** BARBARA M. PIZZOLATO, ESQ.

02/03/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name LEONHART, MICHELLE M  
Address 833 SW 54TH LANE  
City-State-Zip: CAPE CORAL FL 33914

Title MGRM  
Name LEONHART, CARL D  
Address 833 SW 54TH LANE  
City-State-Zip: CAPE CORAL FL 33914

Title MGRM  
Name MAHAN, WESLEY A  
Address 5183 OLD LAKE ROAD  
City-State-Zip: GENEVA ON THE LAKE OH 44041

Title MGRM  
Name MAHAN, HOLLY  
Address 5183 OLD LAKE ROAD  
City-State-Zip: GENEVA ON THE LAKE OH 44041

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:** MICHELLE M LEONHART**MGRM BY AUTHORIZED  
REPRESENTATIVE**

02/03/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date