

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000096387

**Entity Name:** THREE WISHES, LLC

**Current Principal Place of Business:**

8223 PINE CAY RD  
WELLINGTON, FL 33414

**Current Mailing Address:**

8223 PINE CAY RD  
WELLINGTON, FL 33414 US

**FEI Number:** 36-4790947

**Certificate of Status Desired:** No

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

CAPANO, NANCY  
8223 PINE CAY RD  
WELLINGTON, FL 33414 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:** NANCY CAPANO

01/25/2016

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name CAPANO, NANCY  
Address 8223 PINE CAY RD  
City-State-Zip: WELLINGTON FL 33414

*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:** NANCY CAPANO

MGMR

01/25/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date