

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000114555

Entity Name: THREE WAVES CONSULTING AND MANAGEMENT LLC

Current Principal Place of Business:

489 BLUE CYPRESS DR
GROVELAND, FL 34736

Current Mailing Address:

489 BLUE CYPRESS DR
GROVELAND, FL 34736

FEI Number: 84-2031773

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KUCZEREPA, AUBREY
489 BLUE CYPRESS DR
GROVELAND, FL 34736 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	MGR	Title	MGR
Name	KUCZEREPA, AUBREY	Name	ARTHUR, CHELSEA
Address	489 BLUE CYPRESS DR	Address	915 HADDOCK DR
City-State-Zip:	GROVELAND FL 34736	City-State-Zip:	CLERMONT FL 34711
Title	MGR		
Name	ARTHUR, CHRISTINA		
Address	915 HADDOCK DR		
City-State-Zip:	CLERMONT FL 34711		

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: AUBREY KUCZEREPA

OWNER

02/05/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date