Notice of Exempt
Offering of Securities

₩ashington Do U.S. Securities and Exchange Commission

Washington, DC 20549

(See instructions beginning on page 5)
Intentional misstatements or omissions of fact constitute federal criminal violations. See 18 U.S.C. 1001.

JAN 16 2009 145 45 9 9 OMB APPROVAL

OMB Number: 3235-0076

Expires: November 30, 2008

Estimated average burden hours per response: 4.00

| tem 1. Issuer's Identity | | | |
|---|-----------------------------|---------------------------|---|
| Name of Issuer | Previous Name(s) | None | Entity Type (Select one) |
| QVR Capital 3, LLC | Tremous numeros | | Corporation |
| Jurisdiction of Incorporation/Organization | | PPOO | Limited Partnership |
| California | 7 | PROCESSE | Limited Liability Company |
| | | | |
| Year of Incorporation/Organization | | JAN 2 8 2009 | Other (Specify) |
| (Select one) Over Five Years Ago Within Last Five Years | ears 2000 Ye | HOMSON REUTE | |
| (specify year) | 2008 | SAMEUIE | KS |
| (If more than one issuer is filing this notice, che | eck this box 🔲 and identify | additional issuer(s) by a | ttaching Items 1 and 2 Continuation Page(s).) |
| Item 2. Principal Place of Business a | ind Contact Informat | ion | |
| Street Address 1 | | Street Address 2 | |
| 2020 Main Street, Suite 500 | | | |
| City | State/Province/Country | ZIP/Postal Code | Phone No. |
| Irvine | California | 92614 | 714-421-4199 |
| | Cumorina | 2017 | |
| tem 3. Related Persons | | | |
| Last Name | First Name | | Middle Name |
| Kramer | Kathleen | | |
| Street Address 1 | | Street Address 2 | 10 10 10 10 10 10 10 10 10 10 10 10 10 1 |
| 5911 Heil Avenue, Suite B | | | |
| City | State/Province/Country | ZIP/Postal Code | |
| Huntington Beach | California | 92649 | 09002276 |
| | Director Promoter | | |
| | | | |
| Clarification of Response (if Necessary) Mar | | | |
| | | s by checking this box 🔀 | and attaching Item 3 Continuation Page(s). |
| Item 4. Industry Group (Select o | | | |
| Agriculture Banking and Financial Services | <u> </u> | s Services | Construction |
| Commercial Banking | υ Energy ← Elect | tric Utilities | REITS & Finance Residential |
| Insurance | Ener | gy Conservation | Q |
| Investing | = | Mining | _ |
| Investment Banking | <u> Envir</u> | onmental Services | Retailing |
| Pooled Investment Fund | Oil 8 | Gas | Restaurants Technology |
| If selecting this industry group, also selec | | er Energy | Technology Computers |
| type below and answer the question below | Health C | | (Telecommunications |
| Hedge Fund | | echnology | Other Technology |
| Private Equity Fund | $\overline{\mathcal{Q}}$ | th Insurance | Travel |
| Venture Capital Fund Other Investment Fund | | oitals & Physcians | Airlines & Airports |
| Is the issuer registered as an invest | | maceuticals | Conventions Lodging & Conventions |
| company under the Investment Co | mpany | r Health Care | Tourism & Travel Services |
| Act of 1940? Yes No | Manufac | _ | Other Travel |
| Other Banking & Financial Services | Real Esta | i re mercial | Other |

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| Item 5. Issuer Size (Select one) | | |
|---|---------------|--|
| Revenue Range (for issuer not specifying "hedge" or "other investment" fund in Item 4 above) | | Aggregate Net Asset Value Range (for issuer specifying "hedge" or "other investment" fund in Item 4 above) |
| O No Revenues | OR | No Aggregate Net Asset Value |
| \$1 - \$1,000,000 | | S1 - \$5,000,000 |
| \$1,000,001 - \$5,000,000 | | \$5,000,001 - \$25,000,000 |
| \$5,000,001 - \$25,000,000 | | \$25,000,001 - \$50,000,000 |
| \$25,000,001 - \$100,000,000 | | \$50,000,001 - \$100,000,000 |
| Over \$100,000,000 | | Over \$100,000,000 |
| Decline to Disclose | | Decline to Disclose |
| O Not Applicable | | Not Applicable |
| Item 6. Federal Exemptions and Exclusions Cla | imed (Sel | ect all that apply) |
| | vestment Com | pany Act Section 3(c) |
| Rule 504(b)(1) (not (i), (ii) or (iii)) | Section 3(c | <u> </u> |
| Rule 504(b)(1)(i) | Section 3(c | - |
| Rule 504(b)(1)(ii) | Section 3(c | <u>—</u> |
| Rule 504(b)(1)(iii) | Section 3(c | |
| Rule 505 Rule 506 | Section 3(c | |
| Rule 506 Securities Act Section 4(6) | Section 3(c | |
| X Securics Net Section 4(0) | Section 3(c |)(7) |
| Item 7. Type of Filing | | |
| New Notice OR Amendmen | nt . | |
| Date of First Sale in this Offering: 03/09/2008 | OR 🗆 | First Sale Yet to Occur |
| Item 8. Duration of Offering | | |
| Does the issuer intend this offering to last more than | | ☐ Yes ☒ No |
| Item 9. Type(s) of Securities Offered (Select | all that appl | ÿ) |
| ⊠ Equity | Pooled | Investment Fund Interests |
| Debt | _ | -in-Common Securities |
| Option, Warrant or Other Right to Acquire | | Property Securities |
| Another Security | U Other (I | Describe) |
| Security to be Acquired Upon Exercise of Option, Warrant or Other Right to Acquire Security | | |
| Item 10. Business Combination Transaction | | 2222 |
| Is this offering being made in connection with a busing transaction, such as a merger, acquisition or exchange offe | | n No Yes X No |
| Clarification of Response (if Necessary) | | |
| | | |
| | | |

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| Item 11. Minimum Investment | | | | - <u></u> |
|---|---------------------------|--|------------------------|---|
| Minimum investment accepted from any | outside investor \$ | 10,000.00 | | |
| Item 12. Sales Compensation | | | | |
| Recipient | | Recipient CRD Number | | |
| | | | | No CRD Number |
| Associated) Broker or Dealer N | one | (Associated) Broker or Dea | aler CRD Nu | mber |
| | | | | ☐ No CRD Number |
| Street Address 1 | | Street Address 2 | | |
| | | | | |
| City | State/Province/ | /Country ZIP/Postal Cod | de | |
| <u> </u> | | | | |
| States of Solicitation All States AL AK AZ AR IL IN IA KS MT SC SD TN (Identify additional person | | CT DE DC ME MD MA NY NC ND VT VA WA ion by checking this box | FL MI OH WV and attach | GA HI ID MN MS MO OK OR PA WI WY PR sing Item 12 Continuation Page(s) |
| | | ······································ | _ | |
| (a) Total Offering Amount | 2,500,000.00 | | OR | ✓ Indefinite |
| (b) Total Amount Sold | 1,090,000.00 | | | |
| (c) Total Remaining to be Sold (Subtract (a) from (b)) Clarification of Response (if Necessary) | 0.00 | | OR | X Indefinite |
| Minimum Offering Size of \$250,000.00 regardless if maximum offering amou | | g Size of \$2,500,000.00; w | ill close no | later than 12/31,2008, |
| Item 14. Investors | | | | |
| Check this box if securities in the offer number of such non-accredited investors. Enter the total number of investors who a | who already have invested | d in the offering: | qualify as ac | credited investors, and enter the |
| Item 15. Sales Commissions and | · | 1 1 | | |
| Provide separately the amounts of sales concheck the box next to the amount. | <u> </u> | <u> </u> | mount is no | et known, provide an estimate an |
| | 5 | Sales Commissions \$ 0 | | Estimate |
| Clarification of Response (if Necessary) | | Finders' Fees \$ 0 | | Estimate |
| | | | | |

number.

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| Item 16. Use of Proceeds | |
|--|--|
| Provide the amount of the gross proceeds of the offering that has been or is used for payments to any of the persons required to be named as exe directors or promoters in response to Item 3 above. If the amount is unkno estimate and check the box next to the amount. | cutive officers, \$ 173,000.00 |
| Clarification of Response (if Necessary) | |
| Acquisition fee paid to managers of issuer | |
| Signature and Submission | |
| Please verify the information you have entered and review the Te | rms of Submission below before signing and submitting this notice. |
| Terms of Submission. In Submitting this notice, each iden | ntified issuer is: |
| the State in which the issuer maintains its principal place of busing process, and agreeing that these persons may accept service on such service may be made by registered or certified mail, in any lagainst the issuer in any place subject to the jurisdiction of the U activity in connection with the offering of securities that is the suprovisions of: (i) the Securities Act of 1933, the Securities Exchan Company Act of 1940, or the Investment Advisers Act of 1940, or State in which the issuer maintains its principal place of business Certifying that, if the issuer is claiming a Rule 505 exemptine reasons stated in Rule 505(b)(2)(iii). | and the Securities Administrator or other legally designated officer of ness and any State in which this notice is filed, as its agents for service of its behalf, of any notice, process or pleading, and further agreeing that Federal or state action, administrative proceeding, or arbitration brought Inited States, if the action, proceeding or arbitration (a) arises out of any object of this notice, and (b) is founded, directly or indirectly, upon the ge Act of 1934, the Trust Indenture Act of 1939, the Investment or any rule or regulation under any of these statutes; or (ii) the laws of the sor any State in which this notice is filed. Inpution, the issuer is not disqualified from relying on Rule 505 for one of any state in which the input of the inp |
| "covered securities" for purposes of NSMIA, whether in all instances or d | information. As a result, if the securities that are the subject of this Form D are tue to the nature of the offering that is the subject of this Form D, States cannot and can require offering materials only to the extent NSMIA permits them to do |
| | be true, and has duly caused this notice to be signed on its behalf by the ttach Signature Continuation Pages for signatures of issuers identified |
| Issuer(s) | Name of Signer |
| QVR Capital 3, LLC | Natasha Zaharov |
| Signature | Title |
| Natasha Zaharov | Attorney, Panattoni Law Firm |
| Number of continuation pages attached: 1 Persons who respond to the collection of information contained in this | form are not required to respond unless the form displays a currently valid OMB |

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Item 3 Continuation Page

| ast Name | First Name | | Middle Name |
|---|--|--|---|
| Corral | Forrest | | |
| treet Address 1 | | Street Address 2 | |
| 020 Main Street, Suite 500 | | | |
| ity | State/Province/Countr | y ZIP/Postal Code | |
| vine | California | 92614 | |
| elationship(s): Executive Office | r 🔀 Director 🔲 Promo | oter | |
| Clarification of Response (if Necessary) | Managing Member of F | RCM Investments, LLC, its M | Manager |
| Last Name | First Name | | Middle Name |
| Swift | Roger | | |
| itreet Address 1 | | Street Address 2 | |
| 2020 Main Street, Suite 500 | | | |
| ity | State/Province/Countr | y ZIP/Postal Code | |
| rvine | California | 92614 | |
| Relationship(s): Executive Office | r 💢 Director 🦳 Prom | oter | |
| • 📛 | Managing Member of F | RCM Investments, LLC, its I | Manager |
| Clarification of Response (if Necessary) | Managing Member of F | RCM Investments, LLC, its I | Manager — — — — — — — — — — — — — — — — — — — |
| Clarification of Response (if Necessary) Last Name | | | |
| Clarification of Response (if Necessary) | | RCM Investments, LLC, its I | |
| Last Name | First Name | Street Address 2 | |
| Clarification of Response (if Necessary) | | Street Address 2 | |
| Clarification of Response (if Necessary) Last Name Street Address 1 | First Name State/Province/Count | Street Address 2 y ZIP/Postal Code | |
| Clarification of Response (if Necessary) Last Name Street Address 1 City Relationship(s): Executive Office | First Name State/Province/Count | Street Address 2 y ZIP/Postal Code | |
| Clarification of Response (if Necessary) Last Name Street Address 1 City Clelationship(s): Executive Office | First Name State/Province/Count | Street Address 2 y ZIP/Postal Code | |
| Larification of Response (if Necessary) Last Name Lity Lelationship(s): Executive Office Clarification of Response (if Necessary) | First Name State/Province/Count | Street Address 2 y ZIP/Postal Code | |
| Larification of Response (if Necessary) Last Name Lity Lelationship(s): Executive Office Clarification of Response (if Necessary) | State/Province/Countries | Street Address 2 y ZIP/Postal Code | Middle Name |
| Larification of Response (if Necessary) Last Name Lity Lelationship(s): Executive Office Larification of Response (if Necessary) Last Name | State/Province/Countries | Street Address 2 y ZIP/Postal Code | Middle Name |
| Clarification of Response (if Necessary) Last Name City Clarification of Response (if Necessary) Last Name | State/Province/Countries | Street Address 2 y ZIP/Postal Code oter | Middle Name |
| Clarification of Response (if Necessary) Last Name Street Address 1 | State/Province/Countries | Street Address 2 y ZIP/Postal Code oter Street Address 2 | Middle Name |
| Clarification of Response (if Necessary) Last Name City Clarification of Response (if Necessary) Last Name Citreet Address 1 | State/Province/Country The Director Prome First Name | Street Address 2 y ZIP/Postal Code oter Street Address 2 | Middle Name |
| Clarification of Response (if Necessary) Last Name City Clarification of Response (if Necessary) Last Name Citreet Address 1 | State/Province/Count First Name First Name State/Province/Count | Street Address 2 ZIP/Postal Code Oter Street Address 2 ZIP/Postal Code | Middle Name |

(Copy and use additional copies of this page as necessary.)
Form D 9

