#### 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: AARON BLUMBERG AMBR

MIAMI, FL 33131

**Current Principal Place of Business:** 

Entity Name: THREE QUARTER INDIA, LLC

# **Current Mailing Address:**

770 CLAUGHTON ISLAND DRIVE

APT 1013

DOCUMENT# L14000099643

770 CLAUGHTON ISLAND DRIVE APT 1013 MIAMI, FL 33131 US

## FEI Number: 47-1166235

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

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

BLUMBERG, AARON M 770 CLAUGHTON ISLAND DRIVE APT 1013 MIAMI, FL 33131 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		
Authorized Person(s) Detail :			
Title	AMBR	Title	AMBR
Name	BLUMBERG, SANYA	Name	BLUMBERG, AARON M
Address	770 CLAUGHTON ISLAND DRIVE APT 1013	Address	770 CLAUGHTON ISLAND DRIVE APT 1013
City-State-Zip:	MIAMI FL 33131	City-State-Zip:	MIAMI FL 33131

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: No

04/30/2016

Date