

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000212369

**Entity Name:** NUTRISH CONSULTING LLC

**Current Principal Place of Business:**

6732 WOODLAKE DR., APT. 322  
ORLANDO, FL 32810

**Current Mailing Address:**

6732 WOODLAKE DR., APT. 322  
ORLANDO, FL 32810 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** Yes

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

SGANGA, PATRICIA  
6732 WOODLAKE DR., APT. 322  
ORLANDO, FL 32810 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  
Name SGANGA, PATRICIA  
Address 6732 WOODLAKE DR., APT. 322  
City-State-Zip: ORLANDO FL 32810

Title MBR  
Name SGANGA, PATRICIA  
Address 6732 WOODLAKE DR., APT. 322  
City-State-Zip: ORLANDO FL 32810

*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:** PATRICIA SGANGA

01/15/2017

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date