

2013 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M10000003337

Entity Name: INOVANT LLC**Current Principal Place of Business:**900 METRO CENTER BLVD.
FOSTER CITY, CA 94404**Current Mailing Address:**900 METRO CENTER BLVD.
FOSTER CITY, CA 94404**FEI Number:** 74-3070018**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 | POLLITT JR., BYRON H |
| Address | 900 METRO CENTER BLVD. |
| City-State-Zip: | FOSTER CITY CA 94404 |

| | |
|-----------------|------------------------|
| Title | SECRETARY |
| Name | ST. PIERRE, ARIELA |
| Address | 900 METRO CENTER BLVD. |
| City-State-Zip: | FOSTER CITY CA 94404 |

| | |
|-----------------|-----------------------|
| Title | MANAGER |
| Name | SCHARF, CHARLES W |
| Address | 900 METRO CENTER BLVD |
| City-State-Zip: | FOSTER CITY CA 94404 |

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|-----------------|-----------------------|
| Title | ASST. SECRETARY |
| Name | LILLQUIST, CHRISTY |
| Address | 900 METRO CENTER BLVD |
| City-State-Zip: | FOSTER CITY CA 94404 |

| | |
|-----------------|-----------------------|
| Title | TREASURER |
| Name | LAIDERMAN, RICHARD A |
| Address | 900 METRO CENTER BLVD |
| City-State-Zip: | FOSTER CITY CA 94404 |

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CHRISTY LILLQUIST**ASSISTANT SECRETARY** 04/25/2013_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date