LIMITED LIABILITY COMPANY UNIFORM BUSINESS REPORT (UBR)

FILED Apr 30, 2002 8:00 am Secretary of State

UNI	UNIFORM BUSINESS REPORT (UBR)						Secretary of State				
DOCUMENT # L0/00 0000 659						04-30-2	2002 90007	005 ****55.	00		
NXN CONSULTANTS, LLC											
DO NOT WRITE IN THIS SPACE											
2 Principal Place	Place of Business / 3. Mailing Address										
13756 B											
Suite, Apt. #, et	c.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE					
Fort Mye	WS , FL	City & State	City & State			per 59 371	1176	Applied Not Appl			
33907 - 1	838 Country 14	Zip				e of Status Desired		5.00 Additional ee Required			
			Non	· (1		Address of Curre		Agent			
DO NOT WRITE Name Hnu						IYA J · Karunamuni P.O. Box Number is Not Acceptable)					
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in THIS SPACE 13756						Cypren	Cin/c				
					Myers		, FL	Zip Society C	7		
8. The above nam	ed entity submits this statemer	nt for the purpose of changing its re	egistered offic	e or registe	red agent, or bo	oth, in the State of	Florida.		'		
SIGNATURE Signature typed or printed name of registered agent and little if applicable.						<u>. </u>	4.15.0)2	_		
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	Amura J. Kavunamuni 13756 Bald Cypren Circle			ss	*				33B		
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.											
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SIGNATU	RE: Tumal	ME OF SIGNING MANAGING MEMBER, MANA	AGER OR AUTUO	RIZED REPRES		Date	07)70	rytime Phone / 3			
sic	STATURE AND THEE OR PRINTED NA	TO SIGNATO MANAGING MEMBER, MARK						·			