

2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L03000001960

FILED
Oct 02, 2009
Secretary of State**Entity Name:** SEVA TECHNOLOGIES LLC**Current Principal Place of Business:**1618 MAHAN CENTER BLVD
SUITE 102
TALLAHASSEE, FL 32308**New Principal Place of Business:****Current Mailing Address:**1618 MAHAN CENTER BLVD
SUITE 102
TALLAHASSEE, FL 32308**New Mailing Address:****FEI Number:** 37-1456390**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**SUNIL, VERMA
1618 MAHAN CENTER BLVD., SUITE 102
TALLAHASSEE, FL 32308 US**Name and Address of New Registered Agent:**

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

MANAGING MEMBERS/MANAGERS:Title: MGRM () Delete
Name: SUNIL, VERMA
Address: 1208 GREENSWARD DRIVE
City-St-Zip: TALLAHASSEE, FL 32312 USTitle: MGRM () Delete
Name: OJILI, REDDY
Address: 9260 SHADY CREST LANE
City-St-Zip: TALLAHASSEE, FL 32312 USTitle: MGRM () Delete
Name: FAUBLE, JASON
Address: 3400 MURDOCK MARTIN LANE
City-St-Zip: TALLAHASSEE, FL 32317 USTitle: MGRM () Delete
Name: O'DONNELL, DANIEL
Address: 1290 CORDOVA CIRCLE
City-St-Zip: TALLAHASSEE, FL 32317**ADDITIONS/CHANGES:**Title: MGRM (X) Change () Addition
Name: LOVELEEN, VERMA
Address: 1208 GREENSWARD DRIVE
City-St-Zip: TALLAHASSEE, FL 32312 USTitle: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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.

SIGNATURE: SUNIL VERMA

MGRM

10/02/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date