

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000089170

Entity Name: 3 SET CONSULTING, LLC

FILED
Feb 17, 2008
Secretary of State

Current Principal Place of Business:

100 NORTH BISCAYNE BOULEVARD
SUITE 500
MIAMI, FL 33132 US

New Principal Place of Business:

Current Mailing Address:

100 NORTH BISCAYNE BOULEVARD
SUITE 500
MIAMI, FL 33132 US

New Mailing Address:

FEI Number: 20-5563334

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JADE ASSOCIATES MIAMI, INC
100 NORTH BISCAYNE BLVD
SUITE 500
MIAMI, FL 33132 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: SETBOUN, CHARLES E
Address: 100 NORTH BISCAYNE BOULEVARD, SUITE 500
City-St-Zip: MIAMI, FL 33132 US

Title: MGRM () Delete
Name: SETBOUN, DAVID R
Address: 100 NORTH BISCAYNE BOULEVARD, SUITE 500
City-St-Zip: MIAMI, FL 33132 US

Title: MGRM () Delete
Name: SETBOUN, MICHAEL J
Address: 100 NORTH BISCAYNE BOULEVARD, SUITE 500
City-St-Zip: MIAMI, FL 33132 US

ADDITIONS/CHANGES:

Title: () 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: SETBOUN CHARLES

MGRM

02/17/2008

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