2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED Apr 14, 2008 8:00 am Secretary of State

DOCUMENT # L07000032812 1. Entity Name INI CAPITAL LLC						03-20-20	008 901	182 045 *	**138.75
Principal Place of Business Mailing Address					•	રા	003	824	
3560 CARDINAL POINT DR 3560 CARDIN STE# 203 STE# 203			DINAL POINT DR			J.	,000	0.2.2	
	LE, FL 32257	JACKSONVILLE, FL 32	257		A IRPOIRT P	N ATI'N IAR'I TANI ETIN ATI	11 FB(11 lib)	HINGI ININI HIND M	DERS (IS IND)
2. Principal F	Place of Business - No P.O. Box	# 3. Mailing Address	3. Mailing Address						
Suite. Apt. #, etc.		Suite, Apt. #, etc.			03162008	Chg-LLC		083 (12/06)	
City & State		City & State	City & State		4. FEI Numb	3718925	5		oplied For of Applicable
Zip	Country	Zlp	Country			of Status Desired		\$5.00 Add	ditional
6. Name and Address of Current Registered Agent				ame	7. Name and	d Address of New R	legistered	Agent	
SARDAROVA, MARINA Y									
	STONE CT PARK, FL 32065		Street Address (P.O. Box Numb	er is Not Acceptable	o) 		
]			C	ilv		-		Zip Cod	
The above	a named entity submits this states	ment for the purpose of changing its		<u> </u>	ad speed or by	uh ia tha Ctara of Ek	FI		
	tions of registered agent.	mont for the purpose of changing he	s registered of	ince or register	an again, or oc	m, m the state of FR	Alua. Yali	r iauranar witti,	ano accept
SIGNATURE	Signature, typed or printed name of register	ed agent and title if applicable. (HOT	E: Reputered Age	m algnatura required	when remaintant)		DATE		
FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75					Make check payable to Florida Department of State			D·	
9.		MEMBERS/MANAGERS	10.			ADDITIONS	CHANGE	S	
1ITLE NAME	MGR SARDAROVA, MARINA Y	Osiate	TITLE	İ				Change	☐ Addition
STREET ADDRESS	428 SUNSTONE CT	_	STREET AD						
CITY-ST-ZIP	ORANGE PARK, FL 3206		CITY-ST-Z	1P					
HAME		☐ Detete	TITLE					☐ Change	Addition
STREET ADDRESS	1		\$1REET ADI	1					
CITY-ST-ZIP		C Cettore	CHY-ST-Z TITLE	P				☐ Change	☐ Addition
HAME		□ neere	HAME	İ				C) cutaists	
STREET ADDRESS CITY-ST-ZIP			STREET ADS	ı.					
TOTLE		☐ Delete	TITLE	-	 -			☐ Channe	☐ Addition
HAME			NAME						() ALCOHOM
STREET ADDRESS CITY-ST-ZIP			SIREET ADI	ŀ					
TIPLE	·	☐ Delete	TITLE	<u>"</u>		-		Change	Addition
KAME			NAME						
STREET ADDRESS			STREET ADS	J					
ITILE		☐ Delete	INTLE	-				☐ Change	☐ Addition
MANE		_ 2000	NAME						
STREET ADDRESS CITY-ST-71P			STREET ADD	1					
11. I hereby	certify that the information suppli	ed with this filing does not quality to			in Chapter 119.	Florida Statutes. I h	rther certi	ly that the info	rmation
N.IOICE190	d on this report is true and accura	ate and that my signature shall have	the same leg	al effect as if m	iade under oatl	i; that I am a manag	jing memb	er or manage	r of the
limited lis	d on this report is true and accura	ate and that my signature shall have trustee empowered to execute this	the same leg	al effect as if m	iade under oati ier 608, Florida	o; that I am a manag Statutes. 3/18/08	jing memb	er or manage	r al the