

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000090756

Entity Name: OSENSE LLC

FILED
Sep 10, 2008
Secretary of State

Current Principal Place of Business:

425 SOUTH AVALON PARK BLVD., SUITE 1000-12
0
ORLANDO, FL 32828

Current Mailing Address:

425 SOUTH AVALON PARK BLVD., SUITE 1000-12
0
ORLANDO, FL 32828

New Principal Place of Business:

425 SOUTH AVALON PARK BLVD
SUITE 1000-120
ORLANDO, FL 32828

New Mailing Address:

425 SOUTH AVALON PARK BLVD
SUITE 1000-120
ORLANDO, FL 32828

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

VYAS, SANJIV
14420 SALINGER ROAD
ORLANDO, FL 32828 US

Name and Address of New Registered Agent:

VYAS, SANJIV
425 SOUTH AVALON PARK BLVD
SUITE 1000-120
ORLANDO, FL 32828 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: SANJIV VYAS

09/10/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES:

Title: MGR () Change (X) Addition
Name: VYAS, SANJIV
Address: 425 SOUTH AVALON PARK BLVD, SUITE 1000-120
City-St-Zip: ORLANDO, FL 32828 US

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: SANJIV VYAS

MGR

09/10/2008

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