

# 2011 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000093159

**FILED**  
**Apr 21, 2011**  
**Secretary of State**

**Entity Name:** ABLY MANAGEMENT CONSULTING LLC

**Current Principal Place of Business:**

OFFICE 14, FIRST FLOOR  
TRINITY HOUSE  
VICTORIA, MAHE, SEYCHELLES, SE SEYCHELLE XX

**New Principal Place of Business:**

**Current Mailing Address:**

OFFICE 14, FIRST FLOOR  
TRINITY HOUSE  
VICTORIA, MAHE, SEYCHELLES, SE SEYCHELLE XX

**New Mailing Address:**

155 OFFICE PLAZA DRIVE  
SUITE A  
TALLAHASSEE, FL 32301 US

**FEI Number:** 98-0581549

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FLORIDA FILING & SEARCH SERVICES INC.  
155 OFFICE PLAZA DRIVE, SUITE A  
TALLAHASSEE, FL 32301 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:** MGR  
**Name:** CORNEILLE MARKETING INC.  
**Address:** SEYCHELLES, OFFICE14, FIRST FL, TRINITY HSE  
**City-St-Zip:** VICTORIA, MAHE, SEYCHELLES, SE SEYCHELLE XX

I hereby 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: CORNEILLE MARKETING INC.

MGR

04/21/2011

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