

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000012278

Entity Name: KLEAN DATA CONSULTING,LLC

FILED
Mar 01, 2009
Secretary of State

Current Principal Place of Business:

6750 NW 186TH STREET
#202
MIAMI, 33015

New Principal Place of Business:

18161 NW 91 CT
MIAMI, FL 33018

Current Mailing Address:

6750 NW 186TH STREET
#202
MIAMI, 33015

New Mailing Address:

18161 NW 91 CT
MIAMI, FL 33018

FEI Number: 41-2267456

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KUNUJI, VIAVON M
6750 NW 186 ST
202
MIAMI, FL 33015 US

Name and Address of New Registered Agent:

KUNUJI, VIAVON M
18161 NW 91 CT
MIAMI, FL 33018 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: VIAVON M. KUNUJI

03/01/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: KUNUJI-SOROH, VIKON
Address: 6750 NW 186TH ST, #202
City-St-Zip: MIAMI, FL 33015

Title: MGRM () Delete
Name: KUNUJI, VIAVON M
Address: 6750 NW 186 TH ST, #202
City-St-Zip: MIAMI, FL 33015

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: KUNUJI-SOROH, VIKON
Address: 18161 NW 91 CT
City-St-Zip: MIAMI, FL 33018

Title: MGRM (X) Change () Addition
Name: KUNUJI, VIAVON M
Address: 18161 NW 91CT
City-St-Zip: MIAMI, FL 33018

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: VIAVON M. KUNUJI

MGRM

03/01/2009

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