

# **2011 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L09000024450

**FILED**  
**Jun 09, 2011**  
**Secretary of State**

**Entity Name:** N SOLUTIONS INTERNATIONAL, LLC

**Current Principal Place of Business:**

111 E MONUMENT AVENUE  
309  
KISSIMMEE, FL 347415772 US

**New Principal Place of Business:**

11753 SOUTH ORANGE BLOSSOM TRAIL  
SUITE A  
ORLANDO, FL 32837 US

**Current Mailing Address:**

111 E MONUMENT AVENUE  
309  
KISSIMMEE, FL 347415772 US

**New Mailing Address:**

11753 SOUTH ORANGE BLOSSOM TRAIL  
SUITE A  
ORLANDO, FL 32837 US

**FEI Number:** 80-0366918

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

NIEVES, JUAN C  
111 E MONUMENT AVENUE  
309  
KISSIMMEE, FL 34741 US

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

NIEVES, JUAN C  
11753 SOUTH ORANGE BLOSSOM TRAIL  
SUITE A  
ORLANDO, FL 32837 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: \_\_\_\_\_

06/09/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: NIEVES, JUAN C  
Address: 11753 SOUTH ORANGE BLOSSOM TRAIL SUITE A  
City-St-Zip: ORLANDO, FL 32837 US

Title: MGR  
Name: GUZMAN, ZENEIKA D  
Address: 11753 SOUTH ORANGE BLOSSOM TRAIL SUITE A  
City-St-Zip: ORLANDO, FL 32837 US

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: JUAN NIEVES

MGR

06/09/2011

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