

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000042754

**FILED**  
**Mar 31, 2011**  
**Secretary of State**

**Entity Name:** INTERACTIVE NCLEX TUTORING, LLC

**Current Principal Place of Business:**

1111 PARK CENTRE BLVD  
204  
MIAMI GARDENS, FL 33169

**New Principal Place of Business:**

**Current Mailing Address:**

1111 PARK CENTRE BLVD  
204  
MIAMI GARDENS, FL 33169

**New Mailing Address:**

**FEI Number:** 26-4801861

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COWAN, DIANA  
3001 NE 185 STREET  
APT 213  
AVENTURA, FL 33180 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: MGRM  
Name: COWAN, DIANA  
Address: 3001 NE 185 STREET, APT 213  
City-St-Zip: AVENTURA, FL 33180

Title: MGRM  
Name: RAMON, MIESES  
Address: 3001 NE 185TH ST APT 213  
City-St-Zip: AVENTURA, FL 33180

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: DIANA COWAN

MGR

03/31/2011

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