

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000022139

Entity Name: GROUP NOS LLC

**FILED**  
**Jan 09, 2012**  
**Secretary of State**

**Current Principal Place of Business:**

260 CRANDON BLVD  
SUITE# 32-202  
KEY BISCAYNE, FL 33149

**New Principal Place of Business:**

**Current Mailing Address:**

260 CRANDON BLVD  
SUITE# 32-202  
KEY BISCAYNE, FL 33149

**New Mailing Address:**

FEI Number: 27-5080680

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

WORTELBOER, JULIAN  
260 CRANDON BLVD  
SUITE# 32202  
KEY BISCAYNE, FL 33149 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: WORTELBOER, JULIAN  
Address: 260 CRANDON BLVD SUITE# 32202  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: MGRM  
Name: NABHEN, JAMES  
Address: 260 CRANDON BLVD SUITE#32202  
City-St-Zip: KEY BISCAYNE, FL 33149

Title: MGRM  
Name: SQUILLARI, PIER  
Address: 260 CRANDON BLVD SUITE#32202  
City-St-Zip: KEY BISCAYNE, FL 33149

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: JULIAN WORTELBOER

MG

01/09/2012

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