2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # M00000002042

1. Entity Name

DELOITTE CONSULTING (HOLDING SUB) LLC



FILED Apr 30, 2008 08:00 AM Secretary of State

Principal Place of Business

1633 BROADWAY NEW YORK, NY 10019 Mailing Address

US FIRMS TAXES 4022 SELLS DRIVE HERMITAGE, TN 37076



04092008 No Chg-LLC

CR2E083 (12/07)

4. FEI Number 02-0597650	<u>-</u>	Applied For
	Ī	Not Applicable
_	\$5.0 /	1

5. Certificate of Status Desired

\$5.00 Additional Fee Required

	Name and Address of Current Registered Agent	
1201 HAY	ATION SERVICE COMPANY S STREET SSEE, FL 32301-2525	DO NOT WRITE IN THIS SPACE
	named entity submits this statement for the purpose of changi ions of registered agent.	ng its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title if applicable	(NOTE: Registered Agent signature required when reinstalling) DATE
	NOW!!! FEE IS \$138.75 / 1, 2008 Fee will be \$538.75	U00000935761 05/23/08-80085-011 138.75
9.	MANAGING MEMBERS/MANAGERS	157757(In-Total Of 1 100.10
.TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	MGRM DELOITTE CONSULTING LLP 1633 BROADWAY NEW YORK, NY 10019	
STREET ADDRESS CITY-ST-ZIP		
TITLE NAME STREET ADDRESS CITY-ST-ZIP		DO NOT WRITE
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TITLE NAME STREET ADDRESS - CITY-ST-ZIP		
TITLE		

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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.

STREET ADDRESS CITY-ST-ZIP

Barbara S. Newman, Partner of Deloitte LLP

Deloitte LLP, partner Deloitte Consulting

Daytime Phone #