

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000016954

Entity Name: XCENDA, L.L.C.**Current Principal Place of Business:**4114 WOODLANDS PARKWAY
SUITE 500
PALM HARBOR, FL 34685**Current Mailing Address:**227 WASHINGTON STREET
CONSHOHOCKEN, PA 19428 US**FEI Number:** 04-3697141**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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:**

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	P
Name	NIGHTENGAL, BRIAN
Address	1300 MORRIS DRIVE
City-State-Zip:	CHESTERBROOK PA 19087

Title	SECRETARY
Name	GADDES, KATHY
Address	227 WASHINGTON STREET
City-State-Zip:	CONSHOHOCKEN PA 19428

Title	MGR
Name	AMERISOURCEBERGAN CONSULTING SERVICES, INC
Address	1300 MORRIS DRIVE
City-State-Zip:	CHESTERBROOK PA 19087

Title	VP
Name	GUTTMAN, TIM G
Address	227 WASHINGTON STREET
City-State-Zip:	CONSHOHOCKEN PA 19428

Title	AS
Name	HIRST, DANIEL T
Address	227 WASHINGTON STREET
City-State-Zip:	CONSHOHOCKEN PA 19428

Title	VPCT
Name	QUINN, J.F.
Address	1300 MORRIS DRIVE
City-State-Zip:	CHESTERBROOK PA 19087

I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: DANIEL T HIRST**ASSISTANT SECRETARY** 04/28/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date