

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000119308

**FILED**  
**Apr 10, 2013**  
**Secretary of State**  
**CC7314378178**

**Entity Name:** NILATA LLC

**Current Principal Place of Business:**

10210 THURSTON GROVES BLVD  
SEMINOLE, FL 33778

**Current Mailing Address:**

10210 THURSTON GROVES BLVD  
SEMINOLE, FL 33778 US

**FEI Number:** 20-8058443

**Certificate of Status Desired:** No

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

CHAMARTHY, MANIK  
10210 THURSTON GROVES BLVD  
SEMINOLE, FL 33778 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 MGRM  
Name CHAMARTHY, MANIK  
Address 10210 THURSTON GROVES BLVD  
City-State-Zip: SEMINOLE FL 33778

Title MGRM  
Name KANNAN, KAMAL  
Address 600 SANDY HOOK COURT  
City-State-Zip: FOSTER CITY CA 94404

Title MGRM  
Name VEDERE, TANUJA  
Address 1801 SE HILLMORE DRIVE, C107  
City-State-Zip: PORT ST LUCIL FL 34952

*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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MANIK CHAMARTHY

**MGRM**

**04/10/2013**

Electronic Signature of Signing Authorized Person(s) Detail

Date