

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000049741

**Entity Name:** SALJADE CONSULTING GROUP, L.L.C.

**Current Principal Place of Business:**

5305 NW 126 DRIVE  
CORAL SPRINGS, FL 33076

**Current Mailing Address:**

5305 NW 126 DR  
CORAL SPRINGS, FL 33076

**FEI Number:** 26-2651139

**Certificate of Status Desired:** No

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

LOPEZ, SOPHIA A  
1250 S PINE ISLAND RD  
SUITE 325  
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            AUTHORIZED MEMBER  
Name            LOPEZ, SOPHIA A  
Address        5305 NW 126 DRIVE  
City-State-Zip: CORAL SPRINGS FL 33076

Title            MANAGING MEMBER  
Name            LOPEZ, JADE A  
Address        5305 NW 126 DRIVE  
City-State-Zip: CORAL SPRINGS FL 33076

*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:** SOPHIA LOPEZ

**REGISTERED AGENT**

**04/23/2015**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date