

2013 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L09000056259

Entity Name: SEMILAB SDI LLC**Current Principal Place of Business:**10770 N 46TH ST., SUITE E700
TAMPA, FL 33617**Current Mailing Address:**10770 N 46TH ST., SUITE E700
TAMPA, FL 33617 US**FEI Number:** 27-0347663**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MUELLER, AMY M
10770 N 46TH ST., SUITE E700
TAMPA, FL 33617 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	MGR
Name	MOORE, CHRIS
Address	10770 N 46TH ST., SUITE E700
City-State-Zip:	TAMPA FL 33617

Title	MGR
Name	MUELLER, AMY M
Address	5941 63RD TERR. N.
City-State-Zip:	PINELLAS PARK FL 33781

Title	MGR
Name	FINDLAY, ANDREW D
Address	10809 CARROLLWOOD DR.
City-State-Zip:	TAMPA FL 33618

Title	MGR
Name	D'AMICO, JOHN
Address	1116 W. RIVER DRIVE
City-State-Zip:	TEMPLE TERRACE FL 33616

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: AMY M. MUELLER**MANAGER****07/16/2013**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date