

**2015 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L10000034229

**Entity Name:** TRIPURANENI CONSULTING, LLC

**Current Principal Place of Business:**

1157 SOUTH STATE ROAD 7  
WELLINGTON, FL 33414

**Current Mailing Address:**

1157 SOUTH STATE ROAD 7  
WELLINGTON, FL 33414 US

**FEI Number:** 27-2221004

**Certificate of Status Desired:** No

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

JONES FOSTER SERVICE, LLC  
505 S FLAGLER DRIVE  
SUITE 1100  
WEST PALM BEACH, FL 33401 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:** BRIAN D. KENNEDY, MANAGER

05/11/2015

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title PST  
Name TRIPURANENI, NIRMALA  
Address 1157 SOUTH STATE ROAD 7  
City-State-Zip: WELLINGTON FL 33414

*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:** NIRMALA TRIPURANENI

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05/11/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date