

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000027158

Entity Name: NEW DECAID, LLC

Current Principal Place of Business:

19275 WEST CAPITOL DRIVE
SUITE 100
BROOKFIELD, WI 53045

Current Mailing Address:

19275 WEST CAPITOL DRIVE
SUITE 100
BROOKFIELD, WI 53045 US

FEI Number: 27-5347730

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KUTTEMPELOOR, SANJAY
4501 GULF SHORE BLVD N
APARTMENT 904
NAPLES, FL 34103 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: SANJAY KUTTEMPELOOR

04/11/2016

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name KUTTEMPELOOR, SANJAY
Address 19275 WEST CAPITOL DRIVE
SUITE 100
City-State-Zip: BROOKFIELD WI 53045

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: SANJAY KUTTEMPELOOR

MANAGER

04/11/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date