

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000104221

**Entity Name:** GOSAI, LLC

**Current Principal Place of Business:**

809 NW 21ST AVENUE  
CHIEFLAND, FL 32626

**Current Mailing Address:**

809 NW 21ST AVENUE  
CHIEFLAND, FL 32626

**FEI Number:** 45-3248169

**Certificate of Status Desired:** No

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

PATEL, KOKILA M  
809 NW 21ST AVENUE  
CHIEFLAND, FL 32626 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	PTR	Title	PTR
Name	PATEL, KOKILA M	Name	GOSAI, HITENDRA J
Address	1125 N YOUNG BLVD	Address	1125 N YOUNG BLVD
City-State-Zip:	CHIEFLAND FL 32626	City-State-Zip:	CHIEFLAND FL 32626

*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:** KOKILA M PATEL

**MGR**

**01/09/2014**

Electronic Signature of Signing Authorized Person(s) Detail

Date