

**2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M10000003337

**Entity Name:** INOVANT LLC

**Current Principal Place of Business:**

900 METRO CENTER BLVD.  
FOSTER CITY, CA 94404

**Current Mailing Address:**

900 METRO CENTER BLVD.  
FOSTER CITY, CA 94404

**FEI Number:** 74-3070018

**Certificate of Status Desired:** No

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

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301-2525 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           MANAGER, CFO, EXECUTIVE VICE  
                  PRESIDENT  
Name           PRABHU, VASANT  
Address       1 MARKET STREET  
                  SUITE 600  
City-State-Zip: SAN FRANCISCO CA 94105

Title           PRESIDENT  
Name           MCINERNEY, RYAN  
Address       1 MARKET STREET  
                  SUITE 600  
City-State-Zip: SAN FRANCISCO CA 94105

Title           MANAGER, CEO, CHAIRMAN  
Name           SCHARF, CHARLES W  
Address       1 MARKET STREET  
                  SUITE 600  
City-State-Zip: SAN FRANCISCO CA 94105

Title           ASST. SECRETARY  
Name           CHOI, SUE  
Address       900 METRO CENTER BLVD.  
City-State-Zip: FOSTER CITY CA 94404

*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:** SUE CHOI

**ASST. SECRETARY**

**04/29/2016**

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

\_\_\_\_\_  
Date