NAME OF LLC: SINGH LLC

NO. OF PARTNERS: 2

SHARE PERCENTAGE OF PARTNERS: 50%

NAME OF MEMBER AS PER SSN: CHANDAN SINGH

FIRST NAME : CHANDAN

LAST NAME : SINGH

SSN: 807-67-2047

PHONE NO.: (972)757-8471

EMAIL ID: chandanmph@gmail.com

ADDRESS: 11423 ROSE BOWL DR GLEN ALLEN VA 23059

OBJECTIVE OF BUSINESS: SOFTWARE SERVICES

FIRST NAME : TUNI

LAST NAME : KUMARI

SSN : 599-08-2600

PHONE NO : 8049889971

EMAIL ID : [tiakumarisingh@gmail.com](mailto:tiakumarisingh@gmail.com)

ADDRESS: 11423 ROSE BOWL DR GLEN ALLEN VA 23059

NOTE: IF YOU HAVE 2 OR MORE PARTNERS PLEASE SHARE EACH INDIVIDUAL DETAILS LIKE NAMES, PHONE NO, EMAIL ID,SSN.