

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000014279

Entity Name: JASMEN OF PENSACOLA, L.L.C.

Current Principal Place of Business:

109 BAYBRIDGE DR
GULF BREEZE, FL 32561

Current Mailing Address:

PO BOX 563
GULF BREEZE, FL 32562

FEI Number: 16-1627479

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BOGAN, STEVE
109 BAYBRIDGE DR
GULF BREEZE, FL 32561 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 MGRM
Name KRYS, ALAN
Address 1628 WHISPER BAY BLVD
City-State-Zip: GULF BREEZE FL 32563

Title MGRM
Name BOGAN, STEVE
Address 109 BAYBRIDGE DR.
City-State-Zip: GULF BREEZE FL 32561

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: STEVE BOGAN

MANAGING MEMBER

03/26/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date