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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JEFFREY G. BROEKMAN

Electronic Signature of Signing Authorized Person(s) Detail

BROEKMAN, JEFFREY G 283 CASCARA DR., EAST JACKSONVILLE, FL 32225 US

Name and Address of Current Registered Agent:

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

Authorized Person(s) Detail :

Title	MGR	Title	MGRM
Name	BROEKMAN, JEFFREY G	Name	BROEKMAN, LISA B
Address	283 CASCARA DR., EAST	Address	283 CASCARA DR., EAST
City-State-Zip:	JACKSONVILLE FL 32225	City-State-Zip:	JACKSONVILLE FL 32225

Certificate of Status Desired: No

FILED Mar 26, 2013 Secretary of State CC6658082972

Date

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000015706

Entity Name: J.B. & ASSOCIATES LIMITED LIABILITY COMPANY

Current Principal Place of Business:

283 CASCARA DR., EAST JACKSONVILLE, FL 32225

Current Mailing Address:

283 CASCARA DR., EAST JACKSONVILLE, FL 32225

FEI Number: 13-4356795

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MGR

03/26/2013 Date