### 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000065514

Entity Name: C.J.D.M LLC

**FILED** Feb 22, 2015 **Secretary of State** CC4971299394

## **Current Principal Place of Business:**

4000 W ISLAND BLVD APT 602

AVENTURA, FL 33160

# **Current Mailing Address:**

4000 W ISLAND BLVD **APT 602** AVENTURA, FL 33160 US

**FEI Number: APPLIED FOR** Certificate of Status Desired: Yes

### Name and Address of Current Registered Agent:

MOYAL, PATRICK 10796 PINES BLVD SUITE 204 PEMBROKE PINES, FL 33026 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 MGR Title MGR

Name PALACIOS, CLAUDIA Name PALACIOS, JUAN

4000 W ISLAND BLVD APT 602 Address 4000 W ISLAND BLVD APT 602 Address

AVENTURA FL 33160 City-State-Zip: AVENTURA FL 33160 City-State-Zip:

Title MGR Title **MGRM** 

Name PALACIOS, MARIA Name PALACIOS, DIANA

Address 4000 W ISLAND BLVD APT 602 Address 4000 W ISLAND BLVD APT 602

City-State-Zip: AVENTURA FL 33160 AVENTURA FL 33160 City-State-Zip:

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.