

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000012867

**Entity Name:** JACKSONVILLE RESTAURANT MANAGEMENT, LLC

**Current Principal Place of Business:**

4170 ASHFORD DUNWOODY ROAD  
SUITE #390  
ATLANTA, GA 30319

**Current Mailing Address:**

4170 ASHFORD DUNWOODY ROAD  
SUITE #390  
ATLANTA, GA 30319 US

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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  
Name           HASHIM, AZIZ  
Address        4170 ASHFORD DUNWOODY ROAD  
                  SUITE #390  
City-State-Zip: ATLANTA GA 30319

*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: AZIZ HASHIM**

**MANAGER**

**04/04/2014**

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

\_\_\_\_\_  
Date