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: PHILIPPE COHEN

Electronic Signature of Signing Authorized Person(s) Detail

Entity Name: JSE REAL ESTATE, LLC

DOCUMENT# L11000054753

# Current Principal Place of Business:

20900 NE 30TH AVENUE SUITE 311 AVENTURA, FL 33180

#### **Current Mailing Address:**

20900 NE 30TH AVENUE SUITE 311 AVENTURA, FL 33180

### FEI Number: 99-0365919

### Name and Address of Current Registered Agent:

ESJ ASSET MANAGEMENT LLC 20900 NE 30TH AVENUE SUITE 311 AVENTURA, FL 33180 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

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### Authorized Person(s) Detail :

Title	MGRM	Title	MGRM
Name	COHEN, PHILIPPE	Name	COHEN, EVELYNE
Address	22 AVENUE DU CHATEAU	Address	22 AVENUE DU CHATEAU
City-State-Zip:	LA VARENNE SAINT HILAIRE FR 94210	City-State-Zip:	LA VARENNE SAINT HILAIRE FR 94210

# FILED Jan 09, 2014 Secretary of State CC9192660533

Certificate of Status Desired: No

Date

01/09/2014

MGR