

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000070922

**Entity Name:** AJ&I, LLC

**Current Principal Place of Business:**

5705 CLIFTON AVE.  
JACKSONVILLE, FL 32211

**Current Mailing Address:**

5705 CLIFTON AVE.  
JACKSONVILLE, FL 32211

**FEI Number:** 45-2573587

**Certificate of Status Desired:** No

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

WATSON, JEFFREY T  
12276 SAN JOSE BOULEVARD  
SUITE 721  
JACKSONVILLE, FL 32223 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	BEIGHLEY, PAMELA	Name	BEIGHLEY, SIDNEY LIII
Address	5705 CLIFTON AVE.	Address	29 BITTERSWEET LANE
City-State-Zip:	JACKSONVILLE FL 32211	City-State-Zip:	STAMFORD CT 06903

*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:** PAMELA I BEIGHLEY

**MANAGER**

**04/21/2015**

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

\_\_\_\_\_  
Date