

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000029421

Entity Name: 3JCMA, LLC**Current Principal Place of Business:**5261 CANE ISLAND LOOP UNIT 102
KISSIMMEE, FL 34746**Current Mailing Address:**5261 CANE ISLAND LOOP UNIT 102
KISSIMMEE, FL 34746 US**FEI Number:** 45-4702887**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BATUNI, BRUNO
13538 VILLAGE PARK DR
STE 265
ORLANDO, FL 32837 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:** CAROLINE G LARSON

02/06/2020

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title AMBR
Name SANTOS DA SILVA, JOAO CARLOS
Address 5261 CANE ISLAND LOOP UNIT 102
City-State-Zip: KISSIMMEE FL 34746

Title AMBR
Name CARVALHO DA SILVA, CLAUDIA REGINA
Address 5261 CANE ISLAND LOOP UNIT 102
City-State-Zip: KISSIMMEE FL 34746

Title AMBR
Name CARVALHO DA SILVA, ANA C
Address 5261 CANE ISLAND LOOP UNIT 102
City-State-Zip: KISSIMMEE FL 34746

Title AMBR
Name CARVALHO DA SILVA, MARIA E
Address 5261 CANE ISLAND LOOP UNIT 102
City-State-Zip: KISSIMMEE FL 34746

Title AMBR
Name CARVALHO DA SILVA, JULIA B
Address 5261 CANE ISLAND LOOP UNIT 102
City-State-Zip: KISSIMMEE FL 34746

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: SANTOS DA SILVA, JOAO CARLOS

AMBR

02/06/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date