

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000100070

Entity Name: JAYMAC DISTRIBUTORS LLC**Current Principal Place of Business:**3023 NW 204 TERRACE
MIAMI GARDENS, FL 33056**Current Mailing Address:**3023 NW 204 TERRACE
MIAMI GARDENS, FL 33056**FEI Number:** 46-0889664**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MCDONALD, DWIGHT
3023NW 204 TERRACE
MIAMI, FL 33056 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 | MGRM |
| Name | MCDONALD, DWIGHT |
| Address | 3023NW 204 TERRACE |
| City-State-Zip: | MIAMI FL 33056 |

| | |
|-----------------|--------------------|
| Title | MGRM |
| Name | MCDONALD, JAYDEN |
| Address | 3023NW 204 TERRACE |
| City-State-Zip: | MIAMI FL 33056 |

| | |
|-----------------|---------------------|
| Title | MGRM |
| Name | MCDONALD, STEPHANIE |
| Address | 3023NW 204 TERRACE |
| City-State-Zip: | MIAMI FL 33056 |

| | |
|-----------------|------------------------|
| Title | MGRM |
| Name | MCDONALD , ALYSSA |
| Address | 3023 NW 204 TERRACE |
| City-State-Zip: | MIAMI GARDENS FL 33056 |

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: DWIGHT MCDONALD

MGRM

04/29/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date