

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000134771

Entity Name: JATUN LLC

Current Principal Place of Business:

7500 NW 25 ST. #109
MIAMI, FL 33122

Current Mailing Address:

P.O. BOX 227143
MIAMI, FL 33222

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

QUILCATE, SARA M
7500 NW 25 ST. #109
MIAMI, FL 33122 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
Name QUILCATE, SARA
Address P.O. BOX 227143
City-State-Zip: MIAMI FL 33222

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: SARA QUILCATE

MANAGER

07/31/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date