

**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000159224

**Entity Name:** JAJC, LLC

**Current Principal Place of Business:**

4101 PINE TREE DRIVE, SUITE 1817  
MIAMI BEACH, FL 33140

**Current Mailing Address:**

PO BOX 402492  
MIAMI BEACH, FL 33140 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

THE TARICH LAW FIRM P.A.  
19495 BISCAYNE BOULEVARD, SUITE 606  
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

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name CHAMES, JONATHAN A  
Address PO BOX 402492  
City-State-Zip: MIAMI BEACH FL 33140

Title MGRM  
Name CHAMES, JENNIFER L  
Address PO BOX 402492  
City-State-Zip: MIAMI BEACH FL 33140

*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:** JONATHAN A CHAMES

MGRM

03/27/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date