

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000085076

Entity Name: JAKLEENN LLC

Current Principal Place of Business:

7466 W MOUNT VERNON ST
GLEN ST MARY, FL 32040

Current Mailing Address:

8378 ROCKRIDGE DRIVE
JACKSONVILLE, FL 32244 US

FEI Number: 46-2960321

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DORNBLASER, JOHN S
9965-26 SAN JOSE BLVD
JACKSONVILLE, FL 32244 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 DAMARJIAN, JAKLEEN
Address 8378 ROCKRIDGE DRIVE
City-State-Zip: JACKSONVILLE FL 32244

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: JAKLEEN DAMARJIAN

MANAGER

02/26/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date