

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000136750

**Entity Name:** JLA MEDIOPS LLC

**Current Principal Place of Business:**

3815 POND APPLE DRIVE  
WESTON , FL 33332

**Current Mailing Address:**

3815 POND APPLE DRIVE  
WESTON , FL 33332 US

**FEI Number:** 46-3825951

**Certificate of Status Desired:** No

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

SHASHATY, JOAN L  
3815 POND APPLE DR  
WESTON, FL 33332 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            PRESIDENT  
Name            SHASHATY, JOAN L  
Address        3815 POND APPLE DRIVE  
City-State-Zip: WESTON FL 33332

*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:** JOAN L SHASHATY

**OWNER**

**03/27/2015**

\_\_\_\_\_ Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date