

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000051430

**Entity Name:** SNJ, LLC

**Current Principal Place of Business:**

1890 N TAMIAMI TRAIL  
UNIT G  
NORTH FORT MYERS, FL 33903

**Current Mailing Address:**

1890 N TAMIAMI TRAIL  
UNIT G  
NORTH FORT MYERS, FL 33903 US

**FEI Number:** 32-0437231

**Certificate of Status Desired:** No

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

KHALIL, MALEK  
13960 LAKE MAHOGANY BLVD  
#1921  
FORT MYERS, FL 33907 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	Title	MANAGER
Name	KHALIL, MALEK	Name	HIPPELI, SARA N
Address	13960 LAKE MAHOGANY BLVD UNIT 1921	Address	13960 LAKE MAHOGANY BLVD #1921
City-State-Zip:	FORT MYERS FL 33907	City-State-Zip:	FORT MYERS FL 33907

*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:** MALEK KHALIL

**MANGER**

**02/25/2015**

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

\_\_\_\_\_  
Date