

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000094274

Entity Name: JASCAP, LLC

Current Principal Place of Business:

28493 DEL LAGO WAY
BONITA SPRINGS, FL 34135

Current Mailing Address:

P.O. BOX 39
3590 ROUTE 9 SUITE 202
COLD SPRING, NY 10516 US

FEI Number: 47-1094634

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SHAD, JEFFREY A
28493 DEL LAGO WAY
BONITA SPRINGS, FL 34135 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	AMBR	Title	AUTHORIZED REPRESENTATIVE
Name	SHAD, JEFFREY A	Name	PERSONICK, CHERYL ANNE
Address	P.O. BOX 39 3590 ROUTE 9 SUITE 202	Address	P.O. BOX 39 3590 ROUTE 9 SUITE 202
City-State-Zip:	COLD SPRING NY 10516	City-State-Zip:	COLD SPRING NY 10516

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: JEFFREY A. SHAD

MEMBER

01/11/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date