

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000195363

**Entity Name:** AMJJC LLC

**Current Principal Place of Business:**

716 E. MEMORIAL BLVD  
LAKELAND, FL 33801

**Current Mailing Address:**

P.O. BOX 15  
HIGHLAND CITY, FL 33846 US

**FEI Number:** 47-5668180

**Certificate of Status Desired:** No

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

JOB, MATHEW  
5631 VINTAGE VIEW BLVD  
LAKELAND, FL 33812 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 JOB, MATHEW  
Address 5631 VINTAGE VIEW BLVD  
City-State-Zip: LAKELAND FL 33812

Title AMBR  
Name MATHEW, JOEL G  
Address 5631 VINTAGE VIEW BLVD  
City-State-Zip: LAKELAND FL 33812

Title AMBR  
Name MATHEW, ANNIE  
Address 5631 VINTAGE VIEW BLVD  
City-State-Zip: LAKELAND FL 33812

*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:** MATHEW JOB

MGR

04/05/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date