

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000000206

**Entity Name:** J.A. PAVERS, LLC.

**Current Principal Place of Business:**

14365 E. COLONIAL DR.  
A-3  
ORLANDO, FL 32826

**Current Mailing Address:**

PO BOX 780854  
ORLANDO, FL 32878 US

**FEI Number:** 81-1027843

**Certificate of Status Desired:** No

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

ADAMETZ, JODY  
14365 E. COLONIAL DR.  
A-3  
ORLANDO, FL 32826 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 ADAMETZ, JODY  
Address 16325 BIRCHWOOD WAY  
City-State-Zip: ORLANDO FL 32828

Title MGR  
Name ADAMETZ, JESSE  
Address 6505 SEA STAR CT. 303  
City-State-Zip: GOLETA CA 93117

Title MGR  
Name SCOTT, MYRA  
Address 2706 HILDA CT  
City-State-Zip: ORLANDO FL 32826

*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:** JODY ADAMETZ

**MGR**

**03/05/2019**

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

\_\_\_\_\_  
Date