

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000196732

**Entity Name:** JENJACON LLC

**Current Principal Place of Business:**

AVENIDA DE LAS FUENTES 35 #P5  
COLONIA LOMAS DE TECAMACHALCO MEXICO  
CIUDAD DE MEXICO MEXICO52780, FL

**Current Mailing Address:**

AVENIDA DE LAS FUENTES 35 #P5  
COLONIA LOMAS DE TECAMACHALCO MEXICO  
CIUDAD DE MEXICO MEXICO52780, FL US

**FEI Number:** 32-4882727

**Certificate of Status Desired:** Yes

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

INCORP SERVICES, INC  
17888 67TH CT. NORTH  
LOXAHATCHEE, FL 33470 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	MANAGER
Name	JENJACON S.A. DE C.V.	Name	SCHIDLOW, JESSICA
Address	AVENIDA DE LAS FUENTES 35 #P5	Address	AVENIDA DE LAS FUENTES 35 #P5 COLONIA LOMAS DE TECAMACHALCO MEXICO
City-State-Zip:	CIUDAD DE MEXICO MEXICO52780 AL	City-State-Zip:	CIUDAD DE MEXICO MEXICO52780 FL

*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:** SCHIDLOW , JESSICA

**MANAGER**

**04/05/2022**

Electronic Signature of Signing Authorized Person(s) Detail

Date