

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000160330

**Entity Name:** 5JAB LLC

**Current Principal Place of Business:**

13916 LITTLE RD  
HUDSON, FL 34667

**Current Mailing Address:**

5235 WATERSIDE VISTA LN  
STCLOUD, FL 34771 US

**FEI Number:** 84-2720668

**Certificate of Status Desired:** No

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

SINGH, GAGANDEEP  
5235 WATERSIDE VISTA LN  
STCLOUD, FL 34771 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	MGR
Name	SINGH, GAGANDEEP	Name	SINGH, JEAN J
Address	5235 WATERSIDE VISTA LN	Address	5235 WATERSIDE VISTA LN
City-State-Zip:	STCLOUD FL 34771	City-State-Zip:	STCLOUD FL 34771

*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:** GAGANDEEP SINGH

**MEMBER**

**01/11/2023**

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

\_\_\_\_\_  
Date