

2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M12000001848

Entity Name: PF JAX FOUR, LLC

Current Principal Place of Business:

8661 OLD KINGS RD SO.
JACKSONVILLE, FL 32217

Current Mailing Address:

PO BOX 4007
PORTSMOUTH, NH 03801 US

FEI Number: 45-3329160

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FREGEAU, PETER
8661 OLD KINGS ROAD SOUTH
JACKSONVILLE, FL 32217-4825 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 FREGEAU, PETER
Address PO BOX 4007
City-State-Zip: PORTSMOUTH NH 03802

Title MGR
Name PAPPAS, BRYAN
Address PO BOX 4007
City-State-Zip: PORTSMOUTH NH 03802

Title MGR
Name MURRAY, MICHAEL
Address PO BOX 4007
City-State-Zip: PORTSMOUTH NH 03802

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: MICHAEL MURRAY

MANAGER

01/18/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date