


FILED
Jul 16, 2007 8:00 am
Secretary of State

DOCUMENT # L00000007166					
1. Entity Name J. CUBED CONSULTING, LLC					
Principal Place of Business 4911 20TH AVENUE, WEST BRADENTON, FL 34209			Mailing Address P.O. BOX 3319 SARASOTA, FL 34230		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. City & State Zip Country			3. Mailing Address 4911 20th Ave W Suite, Apt. #, etc. City & State Bradenton FL Zip Country 34209		
6. Name and Address of Current Registered Agent					
JORDAN, ANTHONY 4911 20TH AVENUE, WEST BRADENTON, FL 34209					Name
					Street Address
					City
					State
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required)</small>					
Filing Fee is \$50.00 Due by September 14, 2007					
9. MANAGING MEMBERS/MANAGERS					
TITLE	NAME	<input type="checkbox"/> Delete	TITLE	NAME	<input type="checkbox"/> Delete
STREET ADDRESS	JORDAN, ANTHONY		STREET ADDRESS		
CITY-ST-ZIP	4911 20TH AVENUE, WEST BRADENTON, FL 34209		CITY-ST-ZIP		
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in the provisions of the Florida Limited Liability Company Act, and that my signature shall have the same legal effect as if I were the owner of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 689, Florida Statutes.					
SIGNATURE: <u>Anthony Jordan</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE</small>					