

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000014366

Entity Name: J & J, LLC

FILED  
Jan 14, 2009  
Secretary of State

**Current Principal Place of Business:**

297 NORTH EAST 6TH AVE  
DELRAY BEACH, FL 33483

**New Principal Place of Business:**

**Current Mailing Address:**

297 NORTH EAST 6TH AVE  
DELRAY BEACH, FL 33483

**New Mailing Address:**

FEI Number: 65-1101832

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

JONAS, HAROLD  
297 NORTH EAST 6TH AVE  
DELRAY BEACH, FL 33483 US

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

JONAS, ARIELLA  
297 NORTH EAST 6TH AVE  
DELRAY BEACH, FL 33483 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: ARIELLA JONAS

01/14/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: JONAS, HAROLD  
Address: 297 NORTH FEDERAL HWY  
City-St-Zip: DELRAY BEACH, FL 33483

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: JONAS, ARIELLA  
Address: 297 NORTHEAST 6TH AVE.  
City-St-Zip: DELRAY BEACH, FL 33483

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: ARIELLA JONAS

MGRM

01/14/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date