

**2004 LIMITED LIABILITY COMPANY
ANNUAL REPORT**

FILED
Jun 04, 2004 08:00 AM
Secretary of State

DOCUMENT # L02000035225

1. Entity Name
J & J MANUFACTURING, L.L.C.



Principal Place of Business
1501 S.E. WALTON BLVD., SUITE 210
BENTONVILLE, AR 72712

Mailing Address
1501 S.E. WALTON BLVD., SUITE 210
BENTONVILLE, AR 72712



03302004 No Chg-LLC

CR2E083 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-1167430

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

KIRKWOOD, PETER T
601 BAYSHORE BLVD., SUITE 700
TAMPA, FL 33606

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____
Signature, typed or printed name of registered agent and title if applicable

**Filing Fee is \$50.00
Due by May 1, 2004**

9. MANAGING MEMBERS/MANAGERS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	MGR SMITH, NAN 1501 S.E. WALTON BLVD., SUITE 210 BENTONVILLE, AR 72712
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06/04/04-80001-015 50.00

**DO NOT WRITE
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

Date _____ Daytime Phone # _____