## **2008 LIMITED LIABILITY COMPANY**

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

## Feb 19, 2008 8:00 am **ANNUAL REPORT Secretary of State** DOCUMENT # L03000021568 --02-19-2008 90065 024 \*\*\*138.75 1. Entity Name JEZELCO DIPLOMACY LIMITED PARTNER, LLC Principal Place of Business Mailing Address 26 ISLAND DRIVE 26 ISLAND DRIVE **BOYNTON BEACH, FL 33436 BOYNTON BEACH, FL 33436** 01042008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For **NOT APPLICABLE** Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent PERKINS, JEAN DO NOT WRITE 26 ISLAND DRIVE BOYNTON BEACH, FL *3*3436 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) Signature, typed or printed name of registered agent and title if applicable FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 MANAGING MEMBERS/MANAGERS 9. MGRM TITLE JEZELCO, LLC MAME 26 ISLAND DRIVE STREET ADDRESS CITY-ST-ZIP BOYNTON BEACH, FL 33436 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. 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.

**FILED** 

Davtime Phone #

Date