


# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

**FILED**  
**Apr 30, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # L03000052387</b> 1. Entity Name J & K TILE WORKS, LLC	
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Principal Place of Business 5194 RICHARDSON RD. CRESTVIEW, FL 32539	Mailing Address 5194 RICHARDSON RD. CRESTVIEW, FL 32539
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<b>DO NOT WRITE IN THIS SPACE</b>
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04242008 No Chg-LLC CR2E083 (12/07)

4. FEI Number 65-1210860	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$5.00</b> Additional Fee Required
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6. Name and Address of Current Registered Agent  MCCLAMMA, JOEY 5194 RICHARDSON RD. CRESTVIEW, FL 32539
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<b>DO NOT WRITE IN THIS SPACE</b>
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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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>	DATE _____
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<b>FILE NOW!!! FEE IS \$138.75</b> <b>After May 1, 2008 Fee will be \$538.75</b>
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9. MANAGING MEMBERS/MANAGERS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR MCCLAMMA, JOEY 5194 RICHARDSON RD. CRESTVIEW, FL 32539
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<p>U000000935958 05/23/08-80092-019 138.75</p> <b>DO NOT WRITE IN THIS SPACE</b>
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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.

<b>SIGNATURE:</b>  <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE</small>	Date: <u>7/25/16</u> <small>Daytime Phone #</small>
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