2006 LIMITED LIAI	BILITY COMI	PANY	01	SECRETARY VISION OF CO.	EU NE c ra-	
DOCUMENT # L040000267  1. Entity Name J.N.G. CONSTRUCTION, LLC	753			06 JAN 13 A	PPORATIONS M <b>IO: 58</b>	
Principal Place of Business 676 WEST PROSPECT ROAD FT. LAUDERDALE, EL 33309	Mailing Address 676 WEST PROSPECT RO			,	wind white Shirl 188 St.	
2. Principal Place of Business 241 NE 44th Street Suite, Apt. #, etc.	3. Malling Address Same Suite, Apt. #, etc.		11142005	REIN-LLC	CR2E101 (6/04)	
City & State Oakland Park, FL	City & State	Country		1100567	Apr No	plied For Applicable
.33334 Broward /USA				of Status Desired  d Address of New Reg	Fee Required	
IPPOLITO: NIGOLE NEW RENNETH 678 WEST PROSPECT ROAD 241	, B. Sandle	Name Street A	Kenneth ddress (P.O. Bax Numb	B	Sander	
Oakland Parky FL			241 DE 44th Street			
	3333 <sup>1</sup>	. 1 . 0	akland Pa	rK	FL Zp Code	34
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 eccept the obligations of registered agent.  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent algorithms required when relinitating)  DATE						
FILE NOWIII FEE IS \$50.00 In accordance with s. 607.1936 After January 1, 2005, Fee will be \$100.00 liability company did not receive			F.S., the limited prior notice.		check payable to department of State	·
9. MANAGING MEMBER		10.		ADDITIONS/CH	HANGES Change	- Addition
MILE MIGRM  NAME IPPOLITO, NICOLE  STREET ADDRESS  CITY-S1-ZIP  FTLAUDERDALE, FL 33309	□ Delete	NAME STREET ADDRESS CITY ST-ZIP	241 NEL Oakland Pa	t4th Street ark. FL 3		Addition
TITLE NAME STREET AUCRESS	☐ Oelcie	TITLE NAME STREET ADDRESS	MERM Kerneth B 241 NE 44	th Street	☐ Change	Addition
CITY-ST-ZIPTITLE NAME	☐ Delete	CITY-ST-ZIP TITLE NAME	MGRM Nathan K	-	3334 Change	Addition
STREET ADDRESS CITY-ST-ZIP	. Dekste	STREET ADDRESS CITY-ST-ZEP	241 NE 4 Oakland	ark It 33	334	☐ Addition
NAME STREET ADDRESS CITY - ST- ZIP		NAME STREET ADDRESS CITY-ST-TIP	01	<b>000064</b> /27/060100	60786 )5022 **	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			Change	☐ Addlion
TITLE NAME STREET ADDRESS CUTY-ST-ZIP	□ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition
11. I hereby certify that the information supplied with this filing does not quality 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:  Description of Pennits and TYPEN OR PRINTED NAME OF PRINTED NAME OF AUTHORIZED REPRESENTATIVE  Description of Pennits and Page 100 Pennits Name 100 Pennits Pen						