

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000059298

FILED
May 19, 2008
Secretary of State

Entity Name: J AND J PARTNERS PAINTING, LLC

Current Principal Place of Business:

836 TWIN LAKES DRIVE
CORAL SPRINGS, FL 33071 US

New Principal Place of Business:

10010 BOYNTON PLACE CIR
#135
BOYNTON BEACH, FL 33437 US

Current Mailing Address:

836 TWIN LAKES DRIVE
CORAL SPRINGS, FL 33071 US

New Mailing Address:

10010 BOYNTON PLACE CIR
#135
BOYNTON BEACH, FL 33437 US

FEI Number: 20-1477375 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

GONZALEZ, JUAN
836 TWIN LAKES DRIVE
CORAL SPRINGS, FL 33071 US

Name and Address of New Registered Agent:

GONZALEZ, JUAN
10010 BOYNTON PLACE CIR
#135
BOYNTON BEACH, FL 33437 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: JUAN GONZALEZ

05/19/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: GONZALEZ, JUAN
Address: 836 TWIN LAKES DRIVE
City-St-Zip: CORAL SPRINGS, FL 33071 US

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: GONZALEZ, JUAN
Address: 10010 BOYNTON PLACE CIR
City-St-Zip: BOYNTON BEACH, FL 33437 US

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: JUAN GONZALEZ

MGRM

05/19/2008

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