2008 LIMITED LIABILITY COMPANY

FILED **ANNUAL REPORT** Apr 04, 2008 08:00 All Secretary of State DOCUMENT # L04000092690 1. Entity Name 3 J FARMS LLC Principal Place of Business Mailing Address **5833 VICTORY ROAD 5833 VICTORY ROAD** BASCOM, FL 32423 BASCOM, FL 32423 US 04022008No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-2040476 Not Applicable \$5.00 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent JOHN, JORDAN DO NOT WRITE **5833 VICTORY ROAD** BASCOM, FL 32423 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 Signature, typed or printed name of registered agent and title if applicable. FILE NOWIII FEE IS \$138.75 U00000981437 After May 1, 2008 Fee will be \$538.75 04/15/08-80099-025 138.75 MANAGING MEMBERS/MANAGERS 9. TITLE MGR JORDAN, JOHN P NAME STREET ADDRESS **5833 VICTORY ROAD** CITY-ST-ZIP BASCOM, FL 32423 MGR TITLE NAME JORDAN, STEPHEN A STREET ADDRESS 5631 LINE ROAD BASCOM, FL 32423 CITY-ST-7IP TITLE JORDAN, MICHAEL D STREET ADDRESS 5635 LINE ROAD DO NOT WRITE CITY-ST-ZIP BASCOM, FL 32423 TITLE IN THIS SPACE

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 people as required by Chapter 608, Florida Statutes.

NAME STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

4-2-08 (850)