2008 LIMITED LIABILITY COMPANY

FILED ANNUAL REPORT May 02, 2008 08:00 AN Secretary of State DOCUMENT # L05000012345 1. Entity Name JACLYN LLC Principal Place of Business Mailing Address 14024 NW 82 AVENUE 14024 NW 82 AVENUE MIAMI LAKES, FL 33016 MIAMI LAKES, FL 33016 05012008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-2229061 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent RAMOS, JORGE DO NOT WRITE 14024 NW 82 AVENUE MIAMI LAKES, FL 33016 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, JURGE RAMOS SIGNATURE. rinted name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 9. MANAGING MEMBERS/MANAGERS MGR TITLE NAME RAMOS, JORGE STREET ADDRESS 14024 NW 82 AVENUE CITY-S1-7IP MIAMI LAKES, FL 33016 .000000948243 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-7IP TITLE NAME STREET ADDRESS

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 it 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:

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