

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000012875

Entity Name: MAJ CONSULTING SERVICES, L.L.C.

**FILED**  
**Apr 29, 2012**  
**Secretary of State**

## **Current Principal Place of Business:**

8879 W. COLONIAL DR.  
# 156  
OCOE, FL 34761

## **New Principal Place of Business:**

2582 MAQUIRE ROAD  
# 156  
OCOE, FL 34761

## **Current Mailing Address:**

8879 W. COLONIAL DR.  
# 156  
OCOE, FL 34761

## **New Mailing Address:**

2582 MAQUIRE ROAD  
# 156  
OCOE, FL 34761

FEI Number: 80-0198589

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

JONES, MAMIE  
8879 W. COLONIAL DR.  
# 156  
OCOE, FL 34761 US

## **Name and Address of New Registered Agent:**

JONES, MAMIE  
2582 MAQUIRE ROAD  
# 156  
OCOE, FL 34761 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:

04/29/2012

Electronic Signature of Registered Agent

Date

## **MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: JONES, MAMIE  
Address: 2582 MAQUIRE ROAD#156  
City-St-Zip: OCOE, FL 34761

I hereby 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: MAMIE JONES

MGR.

04/29/2012

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