

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000014650

FILED  
May 27, 2009  
Secretary of State

Entity Name: AJL RESOURCES UNLIMITED, LLC

**Current Principal Place of Business:**

10282 BOCA ENTRADA, SUITE 220  
BOCA RATON, FL 33462 US

**New Principal Place of Business:**

**Current Mailing Address:**

10282 BOCA ENTRADA, SUITE 220  
BOCA RATON, FL 33462 US

**New Mailing Address:**

P.O. BOX 491083  
LEESBURG, FL 34749

FEI Number: 76-0789085      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:**

HALE, CHANTAL A  
10282 BOCA ENTRADA, SUITE 220  
BOCA RATON, FL 33428 US

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

HALE, CHANTAL A  
10282 BOCA ENTRADA BLVD  
4-220  
BOCA RATON, FL 33428 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:

05/27/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: HALE, AMARLESS S  
Address: 10282 BOCA ENTRADA, SUITE 220  
City-St-Zip: BOCA RATON, FL 33428 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: HALE, AMARLESS S  
Address: P.O. BOX 491083  
City-St-Zip: LEESBURG, FL 34749 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: AMARLESS SUE HALE

MRGM

05/27/2009

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