2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000041197

Entity Name: AARON'S JAX-ORLANDO, L.L.C.

FILED Apr 17, 2012 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

10175 FORTUNE PARKWAY, SUITE 1005 JACKSONVILLE, FL 32256

Current Mailing Address: New Mailing Address:

10175 FORTUNE PARKWAY, SUITE 1005 JACKSONVILLE, FL 32256

FEI Number: 20-2743639 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SILVERFIELD, GARY D 10175 FORTUNE PARKWAY, SUITE 1005 JACKSONVILLE, FL 32256 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:

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGR

Name: OLD MOULTRIE, L.L.C.

Address: 10175 FORTUNE PARKWAY, SUITE 1005

City-St-Zip: JACKSONVILLE, FL 32256

Title: PAS

Name: SILVERFIELD, GARY D

Address: 10175 FORTUNE PARKWAY, SUITE 1005

City-St-Zip: JACKSONVILLE, FL 32256

Title: VPAS

Name: CRANFORD, JAMES A

Address: 10175 FORTUNE PARKWAY, SUITE 1005

City-St-Zip: JACKSONVILLE, FL 32256

Title: VPS

Name: BREEDING, HELEN

Address: 10175 FORTUNE PARKWAY, SUITE 1005

City-St-Zip: JACKSONVILLE, FL 32256

Title: VPST

Name: SILVERFIELD, LEED

Address: 10175 FORTUNE PARKWAY, SUITE 1005

City-St-Zip: JACKSONVILLE, FL 32256

Title: VPAS Name: KAHN, BRAIN

Address: 10175 FORTUNE PARKWAY, SUITE 1005

City-St-Zip: JACKSONVILLE, FL 32256

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 Statues.

SIGNATURE: GARY D SILVERFIELD PAS 04/17/2012