

2006 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT # L05000076028

1. Entity Name
JPG LLC



FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

06 DEC 12 AM 9:19

Principal Place of Business
8231 SUMMA, SUITE A
BATON ROUGE, LA 70809

Mailing Address
8231 SUMMA, SUITE A
BATON ROUGE, LA 70809

2. Principal Place of Business

Florida
Suite, Apt. #, etc.
18 Merri Way

3. Mailing Address

12 Merri Way
Suite, Apt. #, etc.



11272006 REIN-LLC CR2E101 (11/05)

City & State

Rosa Beach FL
Zip 32459
Country Walton

City & State

Santa Rosa Beach FL
Zip 32459
Country Walton

4. FEI Number

061753358

Applied For
Not Applicable

5. Certificate of Status Desired

☒ \$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

NRAI SERVICES, INC.
2731 EXECUTIVE PARK DRIVE, SUITE 4
WESTON, FL 33331

7. Name and Address of New Registered Agent

Name Jeremy Scallan
Street Address (P.O. Box Number is Not Acceptable)
12 Merri Way
City Santa Rosa Beach FL Zip Code 32459

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

Jeremy Scallan

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent Signature required when reinstating)

12-8-06

DATE

FILE NOW!!! FEE IS \$150.00
After January 1, 2007, Fee will be \$200.00

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE MGRM
NAME SCALLAN, PATRICK ☐ Delete
STREET ADDRESS 3910 TWELVE OAKS AVE
CITY-ST-ZIP BATON ROUGE, LA 70820

TITLE MGRM
NAME SCALLAN, JEREMY ☐ Delete
STREET ADDRESS 2201 CAROLINE ST.
CITY-ST-ZIP MANDEVILLE, LA 70448

TITLE MGRM
NAME CHRISTMAN, JAMES ☐ Delete
STREET ADDRESS 4271 TUPELLO
CITY-ST-ZIP BATON ROUGE, LA 70808

TITLE MGRM
NAME EBERTS, GERARD P ☐ Delete
STREET ADDRESS 3916 FERRAN DR.
CITY-ST-ZIP METAIRIE, LA 70002

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

10. ADDITIONS/CHANGES

TITLE 50008248038 ☐ Change ☐ Addition
NAME 12/12/06--01045--009 **155.00
STREET ADDRESS
CITY-ST-ZIP

TITLE MGRM
NAME Jeremy Scallan ☒ Change ☐ Addition
STREET ADDRESS 12 Merri Way
CITY-ST-ZIP Santa Rosa Beach FL 32459

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 report as required by Chapter 608, Florida Statutes.

SIGNATURE:

James W Christian X G Scallan

12-8-06

850 622-1361

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #

James W Christian Jeremy Scallan