

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000090570

Entity Name: J, J, J & J INVESTMENTS, LLC

FILED
Jan 24, 2009
Secretary of State

Current Principal Place of Business:

16505 MILLAN DE AVILA
TAMPA, FL 33613

New Principal Place of Business:

111 VIA PALACIO
PALM BEACH GARDENS, FL 33418

Current Mailing Address:

16505 MILLAN DE AVILA
TAMPA, FL 33613

New Mailing Address:

111 VIA PALACIO
PALM BEACH GARDENS, FL 33418

FEI Number: 20-4664414

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRIDA, ANDRES S
1106 NORTH FRANKLIN STREET
TAMPA, FL 33602 US

Name and Address of New Registered Agent:

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 () Delete
Name: STEVENS, JOEL R II
Address: 16505 MILLAN DE AVILA
City-St-Zip: TAMPA, FL 33613 FL

Title: MGR () Delete
Name: STEVENS, JENNIFER
Address: 16505 MILLAN DE AVILA
City-St-Zip: TAMPA, FL 33613

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: STEVENS, JOEL R II
Address: 111 VIA PALACIO
City-St-Zip: PALM BEACH GARDENS, FL 33418 FL

Title: MGR (X) Change () Addition
Name: STEVENS, JENNIFER
Address: 111 VIA PALACIO
City-St-Zip: PALM BEACH GARDENS, FL 33418

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: JOEL R. STEVENS II

MGR

01/24/2009

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