

**2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L05000114775

**FILED**  
**Sep 11, 2009**  
**Secretary of State****Entity Name:** JMAC, LLC**Current Principal Place of Business:**2902 SE 22ND AVENUE  
CAPE CORAL, FL 339044021 US**New Principal Place of Business:****Current Mailing Address:**2902 SE 22ND AVENUE  
CAPE CORAL, FL 339044021 US**New Mailing Address:****FEI Number:** 84-1696245**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**CANDIANO, JAMES  
2902 SE 22ND AVENUE  
CAPE CORAL, FL 339044021 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: MGRM ( ) Delete  
Name: CANDIANO, JAMES  
Address: 2902 SE 22ND AVENUE  
City-St-Zip: CAPE CORAL, FL 339044021 USTitle: MGRM ( ) Delete  
Name: CANDIANO, MICHELE L  
Address: 2902 SE 22ND AVENUE  
City-St-Zip: CAPE CORAL, FL 339044021 USTitle: ( ) Delete  
Name:  
Address:  
City-St-Zip:**ADDITIONS/CHANGES:**Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:Title: MGRM ( ) Change (X) Addition  
Name: CANDIANO, EMANUELE P  
Address: 205 27TH AVENUE  
City-St-Zip: BROOKLYN, NY 11214 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: JAMES CANDIANO

MGRM

09/11/2009

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