

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000118146

Entity Name: J3 CONSULTING GROUP, LLC.

FILED  
Apr 28, 2008  
Secretary of State

## Current Principal Place of Business:

5000 T-REX AVENUE  
150  
BOCA RATON, FL 33432

## New Principal Place of Business:

## Current Mailing Address:

5000 T-REX AVENUE  
150  
BOCA RATON, FL 33432

## New Mailing Address:

FEI Number: 20-2950947

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HANDLER, HENRY B  
2255 GLADES ROAD  
218A  
BOCA RATON, FL 33431 US

## Name and Address of New Registered Agent:

FICHTER, LYNN  
5000 T REX AVE  
150  
BOCA RATON, FL 33431 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: LYNN FICHTER

04/28/2008

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: SIEGEL, NED L  
Address: 5000 T REX AVE #150  
City-St-Zip: BOCA RATON, FL 33431

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: FICHTER, LYNN  
Address: 5000 T REX AVE #150  
City-St-Zip: BOCA RATON, FL 33431

Title: MGRM ( ) Change (X) Addition  
Name: STERN, RICHARD  
Address: 5000 T REX AVE #150  
City-St-Zip: BOCA RATON, FL 33431

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: LYNN FICHTER

MGRM

04/28/2008

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