

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000027497

FILED  
Apr 23, 2009  
Secretary of State

Entity Name: JLM INVESTMENT GROUP, LLC

**Current Principal Place of Business:**

11452 CAPTIVA KAY DR  
RIVERVIEW, FL 33569

**New Principal Place of Business:**

**Current Mailing Address:**

44 PEACHTREE PLACE NE  
1328  
ATLANTA, GA 30309

**New Mailing Address:**

FEI Number: 20-4511876

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

THEKKUMKATTIL, JAVIT  
11452 CAPTIVA KAY DR  
RIVERVIEW, FL 33569 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: MATHEW, LANCE  
Address: 44 PEACHTREE PLACE NE UNIT 1328  
City-St-Zip: ATLANTA, GA 30309

Title: MGR ( ) Delete  
Name: THEKKUMKATTIL, JAVIT  
Address: 11452 CAPTIVA KAY DR  
City-St-Zip: RIVERVIEW, FL 33569

Title: MGR ( ) Delete  
Name: PADIYARA, MATTHEW  
Address: 13826 S.W. 43 STREET  
City-St-Zip: DAVIE, FL 33330

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JAVIT THEKKUMKATTIL

MGR

04/23/2009

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