

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000060002

Entity Name: JNC SERVICES, LLC

FILED
Jul 09, 2008
Secretary of State

Current Principal Place of Business:

1930 BINNACLE ST.
KISSIMMEE, FL 34744

New Principal Place of Business:

Current Mailing Address:

PO BOX 451535
KISSIMMEE, FL 34745 US

New Mailing Address:

1930 BINNACLE STREET
KISSIMMEE, FL 34744 US

FEI Number: 20-4798718 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

CARRENO, JOSE N
1930 BINNACLE ST.
KISSIMMEE, FL 34744 US

Name and Address of New Registered Agent:

CARRENO, JOSE NEL
1930 BINNACLE ST.
KISSIMMEE, FL 34744 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: JOSE NEL CARRENO

07/09/2008

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: CARRENO, JOSE N
Address: 1930 BINNACLE ST.
City-St-Zip: KISSIMMEE, FL 34744

Title: MGRM () Delete
Name: DIAZ-CARRENO, ELSA
Address: 1930 BINNACLE ST.
City-St-Zip: KISSIMMEE, FL 34744

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: CARRENO, JOSE NEL
Address: 1930 BINNACLE ST.
City-St-Zip: KISSIMMEE, FL 34744

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: JOSE NEL

MGR

07/09/2008

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