20	007 LIMITED LIA ANNUAL	BILITY CO	WPANY	31	Jun 11 Secre	FILED , 2007 tary of 2007 90199 042	8:00 a State
. Entity Narr	MENT # L06000064						
Principal Place of Business 1212 GARRISON DR ST. AUGUSTINE, FL 32092 US		Mailing Address 9838 OLD BAYMEAD BOX # 86 JACKSONVILLE, FL 3;			300 1		IPTEN IN NUM
. Principal P	lace of Business - No. P.O. Box #	3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. *, etc.		03262007	Chg-LLC	CR2E083 (12/06)	
City & Stat		City & State		20-5	709408		pplied For ot Applicable
Zip	Country	Zip	Country		e of Status Desired	\$5.00 Ad Fee Require	
	S. Name and Address of Current	Registered Agent	Name	7. Name an	d Address of New Re	gistered Agent	
212 GAR	ON, JONATHAN J RISON DR ISTINE, FL 32092		Street Addres	s (P.O. Box Numi	ber is Not Acceptable)		
			City	,		FL Zip Coo	Je
	named entity submits this statement to tions of registered agent. Signaus, hose or priced name of registered agent	or the purpose of changing it and the II applicable. (MC	ts registered office or regis	- 	oth, in the State of Flon	ida. I am familiar with; DATE	, and accept
the obligat	tions of registered agent.			- 	Make	·	
the obligat GNATURE Fi	Somera, typed or printed name of registered agent. Somera, typed or printed name of registered agent Illing Fee Is \$50.00 ue by May 1, 2007 MANAGING MEMBI	and the II accelerable (NC	STE: Registered Agers standare recu	- 	Make	DATE check payable to Department of Stat	a
the obligat GNATURE Fi D	tions of registered agent. Somere, hysel or printed neme of registered agent liling Fee is \$50.00 ue by May 1, 2007	and the II applicable. (NC	STE: Registered Agent signature recu	- 	Make Florida	DATE check payable to Department of Stat	
the obligat SNATURE FI D E E E ADDRESS F-ST-ZP E E E ADDRESS	Itons of registered agent. Syntaxe, ipped or press name of registered agent Illing Fee is \$50.00 ue by May 1, 2007 MANAGING MEMBI MGR COVINGTON, JONATHAN J 1212 GARRISON DR	and the II accelerable (NC	10. TITLE NAME STREET ADDRESS CITY- ST-2JP TITLE NAME STREET ADDRESS	- 	Make Florida	DATE check payable to Department of Stat	a
the obligat SNATURE FI D E E E E E E E E E E E E E E E E E E	Itons of registered agent. Syntaxe, ipped or press name of registered agent Illing Fee is \$50.00 ue by May 1, 2007 MANAGING MEMBI MGR COVINGTON, JONATHAN J 1212 GARRISON DR	ERS / MANAGERS	10. TITLE NAME STREET ADDRESS CITY- 51-20P TITLE NAME	- 	Make Florida	DATE check payable to Department of Stat CHANGES Change	be
the obligat GNATURE FI D LE RET ADDRESS Y-ST-ZP LE RET ADDRESS Y-ST-ZP LE RET ADDRESS Y-ST-ZP LE RET ADDRESS Y-ST-ZP LE RET ADDRESS	Itons of registered agent. Syntaxe, ipped or press name of registered agent Illing Fee is \$50.00 ue by May 1, 2007 MANAGING MEMBI MGR COVINGTON, JONATHAN J 1212 GARRISON DR	Inno Ste II ecolocable (NC ERS / MANAGERS Delete	10. 10. TITLE NAME STREET ADDRESS CTTV-ST-ZP TITLE NAME STREET ADDRESS CTTV-ST-ZP TITLE NAME STREET ADDRESS CTTV-ST-ZP	- 	Make Florida	DATE check payable to Department of Stat CHANGES Change	Addition
Uhe obligat GINATURE E E E E E E E E E E E E E E E E E E	Itons of registered agent. Syntaxe, ipped or press name of registered agent Illing Fee is \$50.00 ue by May 1, 2007 MANAGING MEMBI MGR COVINGTON, JONATHAN J 1212 GARRISON DR	ERS / MANAGERS	10. TTLE NAME STREET ACORESS CTTV-ST-ZIP TTLE NAME STREET ACORESS CTTV-ST-ZIP TTLE NAME STREET ACORESS CTTV-ST-ZIP TTLE NAME STREET ACORESS CTTV-ST-ZIP	- 	Make Florida	DATE check payable to Department of Stat CHANGES Change Change Change Change	Addition
the obligat GNATURE	Itons of registered agent. Syntaxe, ipped or press name of registered agent Illing Fee is \$50.00 ue by May 1, 2007 MANAGING MEMBI MGR COVINGTON, JONATHAN J 1212 GARRISON DR	I ano tite il applicable (NC ERS / MANAGERS Delete Delete Delete Delete Delete Delete	10. 10. TITLE NAME STREET ADDRESS CTTY- ST-2IP TITLE NAME STREET ADDRESS CTY- ST-2IP TITLE NAME STREET ADDRESS CTY- ST-2IP TITLE NAME STREET ADDRESS CTTY- ST-2IP TITLE NAME STREET ADDRESS CTTY- ST-2IP	- 	Make Florida	DATE check payable to Department of Stat CHANGES CHANGES Change Change Change Change	Addition
The collegat GINATURE F D D LE ME ME ME ME ME ME ME ME ME ME ME ME ME	Itons of registered agent. Syntaxe, ipped or press name of registered agent Illing Fee is \$50.00 ue by May 1, 2007 MANAGING MEMBI MGR COVINGTON, JONATHAN J 1212 GARRISON DR	I and the if applicable (NC ERS / MANAGERS Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete Delete	10. 10. TITLE NAME STREET ADDRESS CTTY- ST-2IP TITLE NAME STREET ADDRESS CTTY- ST-2IP TITLE NAME STREET ADDRESS CTTY- ST-2IP TITLE NAME STREET ADDRESS CTTY- ST-2IP TITLE NAME STREET ADDRESS CTTY- ST-2IP TITLE NAME STREET ADDRESS CTTY- ST-2IP TITLE NAME STREET ADDRESS CTTY- ST-2IP	d in Chapter 115 made under oal apter 608, Florida	Make Florida ADDITIONS/C	DATE check payable to Department of Stat CHANGES CHANGES Change C	Addition Addition Addition Addition Addition Addition Addition Addition Addition

-



JJC Management Consultants, LLC

(Present Name) (A Florida Limited Liability Company)

FIRST: The Articles of Organization were filed on June 26, 2006 and assigned document number <u>L06000064551</u>.

SECOND: This amendment is submitted to amend the following:

I would like to change the address of my LLC from: 9838 Old Baymeadows

Rd Box #86, Jacksonville, FL 32256

To New Address:

1212 Garrison Dr

St Augustine, FL 32092

Dated March 26 2007 uture of a member or authorized representative of a member Jonathan J. Covington Typed or printed name of signee

Filing Fee: \$25.00

ATTACHMENT 3001 0504

Electronic Articles of Organization For Florida Limited Liability Company L06000064551 FILED 8:00 AM June 26, 2006 Sec. Of State mthomas

Article I

The name of the Limited Liability Company is: JJC MANAGEMENT CONSULTANTS, LLC

Article II

The street address of the principal office of the Limited Liability Company is: 1212 GARRISON DR ST. AUGUSTINE, FL. US 32092

The mailing address of the Limited Liability Company is: 9838 OLD BAYMEADOWS RD BOX # 86 JACKSONVILLE, FL. US 32256

Article III

The purpose for which this Limited Liability Company is organized is: ANY AND ALL LAWFUL BUSINESS.

Article IV

The name and Florida street address of the registered agent is:

JONATHAN J COVINGTON 1212 GARRISON DR ST. AUGUSTINE, FL. 32092

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: JONATHAN J. COVINGTON

ATTACHMENT

Article V 300/0504

The name and address of managing members/managers are:

Title: MGR JONATHAN J COVINGTON 1212 GARRISON DR ST. AUGUSTINE, FL. 32092 US

Article VI

The effective date for this Limited Liability Company shall be:

07/01/2006

Signature of member or an authorized representative of a member Signature: JONATHAN J. COVINGTON

106000064551 ILED 8:00 AM une 26, 2006 June 26, 2006 Sec. Of State June mthomas

ATTACHMENT 30010504 # LOG 00064

Dear Sir or Madam,

Attached is my annual report for JJC Management Consultants, LLC. I have also attached a form to change the address for this corporation. If you need any further information or if something needs amended please contact me at 904-217-0329.

Thank you and Best Regards,