

# 2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000065872

FILED  
Aug 24, 2008  
Secretary of State

Entity Name: JEKUX

**Current Principal Place of Business:**

1555 N TREASURE DRIVE  
403  
N BAY VILLAGE, FL 33141

**New Principal Place of Business:**

**Current Mailing Address:**

1555 N TREASURE DRIVE  
403  
N BAY VILLAGE, FL 33141

**New Mailing Address:**

FEI Number: 20-5139200      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:**

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

KUTNOW, JENNIFER  
1555 N TREASURE DRIVE  
403  
N BAY VILLAGE, FL 33141 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:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: KUTNOW, JENNIFER  
Address: 1555 N TREASURE DRIVE #403  
City-St-Zip: N BAY VILLAGE, FL 33141

**ADDITIONS/CHANGES:**

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: JENNIFER KUTNOW

OWNE

08/24/2008

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