

2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000045956

FILED
Oct 19, 2009
Secretary of State

Entity Name: JOHNSON AND JOHNSON FINANCIAL SERVICES LLC

Current Principal Place of Business:

7127 HIGH BLUFF ROAD
JACKSONVILLE, FL 32244

New Principal Place of Business:

Current Mailing Address:

7127 HIGH BLUFF ROAD
JACKSONVILLE, FL 32244

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **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:

JOHNSON, TIFFANY
7127 HIGH BLUFF ROAD
JACKSONVILLE, FL 32244 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: TIFFANY JOHNSON

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: JOHNSON, TIFFANY
Address: 7127 HIGH BLUFF ROAD
City-St-Zip: JACKSONVILLE, FL 32244

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: JOHNSON, TIFFANY
Address: 7472 SANDSTONE LN
City-St-Zip: UNION CITY, GA 30291

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: TIFFANY JOHNSON

MGRM

10/19/2009

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