


2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 27, 2008 8:00 am
Secretary of State

05-01-2008 90036 022 ***138.75

DOCUMENT # L07000128148	
1. Entity Name J1 HOLDINGS, LLC	

Principal Place of Business 50 NORTH LAURA STREET SUITE 3300 JACKSONVILLE, FL 32202 US	Mailing Address 50 NORTH LAURA STREET SUITE 3300 JACKSONVILLE, FL 32202 US
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



04162008 Chg-LLC CR2E083 (12/06)

4. FEI Number 26-1686424	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$5.00 Additional Fee Required
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6. Name and Address of Current Registered Agent YORK, JEFFREY S 50 NORTH LAURA STREET SUITE 3300 JACKSONVILLE, FL 32202		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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8. 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. I am familiar with, and accept the obligations of registered agent.


SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$138.75
After May 1, 2008 Fee will be \$538.75

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM O'HARE, JAMES P 7 ST. PAUL STREET, SUITE 1000 BALTIMORE, MD 21202 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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: 

4/28/08 4106594458

ATTACHMENT 30007534
#207000128148

J1 HOLDINGS, LLC
7 SAINT PAUL STREET
SUITE 1000
BALTIMORE, MD 21202

1102

citi smith barney

4-28-08

55-7265/212

Pay to the
order of

Florida Department of State
\$138.75

Dollars

55-7265/212

☐ FINANCIAL MANAGEMENT ACCOUNT
800-634-9855
Citibank, N.A. Englewood Cliffs, N.J.

107000128124



MP

⑈001102⑈ ⑈021272655⑈ 1086776057⑈