

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000028623

FILED  
May 23, 2009  
Secretary of State

Entity Name: JASON LEE ENTERPRISES, LLC

## Current Principal Place of Business:

8726 SE BAHAMA CIRCLE  
HOBE SOUND, FL 33455 US

## New Principal Place of Business:

3000 SW 35TH PLACE N306  
GAINESVILLE, FL 32608 US

## Current Mailing Address:

8726 SE BAHAMA CIRCLE  
HOBE SOUND, FL 33455 US

## 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:

LEE, JASON  
507 NW 39TH ROAD APT 230  
GAINESVILLE, FL 32607 US

## Name and Address of New Registered Agent:

LEE, JASON  
3000 SW 35TH PLACE N306  
GAINESVILLE, FL 32608 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: JASON LEE

05/23/2009

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGRM ( ) Delete  
Name: LEE, JASON  
Address: 507 NW 39TH ROAD APT 230  
City-St-Zip: GAINESVILLE, FL 32607 US

## ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition  
Name: LEE, JASON  
Address: 3000 SW 35TH PLACE N306  
City-St-Zip: GAINESVILLE, FL 32608 US

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: JASON LEE

MGRM

05/23/2009

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