

2009 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L08000036682

FILED
Apr 02, 2009
Secretary of State**Entity Name:** AJST LLC**Current Principal Place of Business:**9148 SW 23RD STREET
SUITE C
DAVIE, FL 33324 US**New Principal Place of Business:****Current Mailing Address:**9148 SW 23RD STREET
SUITE C
DAVIE, FL 33324 US**New Mailing Address:****FEI Number:** 26-2380515**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**WALKER, JAMES L
9148 SW 23RD STREET
SUITE C
DAVIE, FL 33324 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:

Electronic Signature of Registered Agent_____
Date**MANAGING MEMBERS/MANAGERS:****Title:** MGRM () Delete
Name: WALKER, JAMES L
Address: 9148 SW 23RD STREET
City-St-Zip: DAVIE, FL 33324**Title:** () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** MGRM () Change (X) Addition
Name: BYRON EXARCOS, ALEXANDRE
Address: 155 OCEAN LANE DRIVE #1208
City-St-Zip: KEY BISCAYNE, FL 333149

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: JAMES L WALKER

MGRM

04/02/2009

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