

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000108389

Entity Name: JUMPING 4 HIM 2, LLC

FILED
Apr 14, 2009
Secretary of State

Current Principal Place of Business:

6661 SEGOVIA CIRCLE NORTH
PEMBROKE PINES, FL 33331

New Principal Place of Business:

3445 N. HIATUS RD
SUNRISE, FL 33351

Current Mailing Address:

6661 SEGOVIA CIRCLE NORTH
PEMBROKE PINES, FL 33331

New Mailing Address:

FEI Number: 80-0305699

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEHN, TODD
6661 SEGOVIA CIRCLE NORTH
PEMBROKE PINES, FL 33331 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: WEHN, TODD
Address: 6661 SEGOVIA CIRCLE NORTH
City-St-Zip: PEMBROKE PINES, FL 33331

Title: MGRM () Delete
Name: WEHN, MICHELLE
Address: 6661 SEGOVIA CIRCLE NORTH
City-St-Zip: PEMBROKE PINES, FL 33331

ADDITIONS/CHANGES:

Title: MGRM (X) Change () Addition
Name: WEHN, TODD
Address: 3445 N. HIATUS RD
City-St-Zip: SUNRISE, FL 33351

Title: MGRM (X) Change () Addition
Name: WEHN, MICHELLE
Address: 3445 N. HIATUS RD
City-St-Zip: SUNRISE, FL 33351

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: TODD WEHN/MICHELLE WEHN

OWNR

04/14/2009

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