

# **2011 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000038487

**FILED**  
**Mar 24, 2011**  
**Secretary of State**

**Entity Name:** DNJ FINANCIAL SOLUTIONS, LLC

**Current Principal Place of Business:**

951 BROKEN SOUND PKWY., #200  
BOCA RATON, FL 33441

**New Principal Place of Business:**

**Current Mailing Address:**

951 BROKEN SOUND PKWY., #200  
BOCA RATON, FL 33441

**New Mailing Address:**

**FEI Number:** 30-0550392

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WAYNE, DEAN  
700 WEST HILLSBORO BLVD.  
BLDG #3, SUITE 101  
DEERFIELD BEACH, FL 33441 US

**Name and Address of New Registered Agent:**

WAYNE, NICHOLAS  
951 BROKEN SOUND PKWY  
BOCA RATON, FL 33487 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:** NICHOLAS WAYNE

03/24/2011

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** WAYNE, NICHOLAS  
**Address:** 951 BROKEN SOUND PKWY., #200  
**City-St-Zip:** BOCA RATON, FL 33441

**Title:** MGRM  
**Name:** WAYNE, NICHOLAS  
**Address:** 621 NW 53 STREET, SUITE 240  
**City-St-Zip:** BOCA RATON, FL 33487

I hereby 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:** NICHOLAS WAYNE

MGR

03/24/2011

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