

# 2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000044382

Entity Name: JEELU LLC

FILED  
May 10, 2010  
Secretary of State

**Current Principal Place of Business:**

528 WALKER AVE. SOUTHWEST  
LIVE OAK, FL 32067

**New Principal Place of Business:**

528 WALKER AVE. SOUTHWEST  
LIVE OAK, FL 32064

**Current Mailing Address:**

528 WALKER AVE. SOUTHWEST  
LIVE OAK, FL 32067

**New Mailing Address:**

528 WALKER AVE. SOUTHWEST  
LIVE OAK, FL 32064

FEI Number: 26-4826324      FEI Number Applied For ( )      FEI Number Not Applicable ( )      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:**

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

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

PATEL, PARIMAL M MGR  
528 WALKER AVE. SW  
LIVE OAK, FL 32064 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: PARIMAL PATEL

05/10/2010

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: PATEL, PARIMAL M  
Address: 528 WALKER AVE. SOUTHWEST  
City-St-Zip: LIVE OAK, FL 32064

Title: MGR  
Name: PATEL, HARSHAD K  
Address: 528 WALKER AVE. SOUTHWEST  
City-St-Zip: LIVE OAK, FL 32064

Title: S  
Name: PATEL, HARSHAD K  
Address: 528 WALKER AVE. SOUTHWEST  
City-St-Zip: LIVE OAK, FL 32064

Title: T  
Name: PATEL, PARIMAL M  
Address: 528 WALKER AVE. SOUTHWEST  
City-St-Zip: LIVE OAK, FL 32064

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: PARIMAL PATEL

MGR

05/10/2010

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