2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000049410

Entity Name: JADE 3508, LLC

Current Principal Place of Business:	**New Principal Place of Business:**
17001 COLLINS AVENUE APT.# 3508 SUNNY ISLES BEACH, FL 33160	

Current Mailing Address:	**New Mailing Address:**
17001 COLLINS AVENUE APT.# 3508 SUNNY ISLES BEACH, FL 33160	

FEI Number: 27-0267056   FEI Number Applied For ( )   FEI Number Not Applicable ( )   Certificate of Status Desired ( )

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
GRUSZKA COHEN, ALEJANDRO 17001 COLLINS AVENUE APT.# 3508 SUNNY ISLES BEACH, FL 33160 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: _____

      Electronic Signature of Registered Agent   Date

MANAGING MEMBERS/MANAGERS:

Title:	MGRM
Name:	GRUSZKA, MILTON
Address:	17001 COLLINS AVENUE, #3508
City-St-Zip:	SUNNY ISLES BEACH, FL 33160

Title:	MGRM
Name:	GRUSZKA COHEN, THALMA
Address:	17001 COLLINS AVENUE, #3508
City-St-Zip:	SUNNY ISLES BEACH, FL 33160

Title:	MGRM
Name:	GRUSZKA COHEN, ALEJANDRO
Address:	17001 COLLINS AVNUE, #3508
City-St-Zip:	SUNNY ISLES BEACH, FL 33160

Title:	MGRM
Name:	GRUSZKA COHEN, LEONARDO
Address:	17001 COLLINS AVENUE, #3508
City-St-Zip:	SUNNY ISLES BEACH, FL 33160

Title:	MGRM
Name:	GRUSZKA COHEN, AILYN
Address:	17001 COLLINS AVENUE, #3508
City-St-Zip:	SUNNY ISLES BEACH, FL 33160

Title:	MGRM
Name:	GRUSZKA COHEN, EITHAN
Address:	17001 COLLINS AVENUE, #3508
City-St-Zip:	SONNY ISLES BEACH, FL 33160

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 Statues.

SIGNATURE: THALMA COHEN DE GRUSZKA   MS   01/10/2012

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