

# **2010 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000060459

**FILED**  
**Apr 07, 2010**  
**Secretary of State**

**Entity Name:** JOBALIZED LLC

**Current Principal Place of Business:**

15132 SW 158TH PL  
MIAMI, FL 33196

**New Principal Place of Business:**

**Current Mailing Address:**

15132 SW 158TH PL  
MIAMI, FL 33196

**New Mailing Address:**

P.O. BOX 772571  
MIAMI, FL 33177

**FEI Number:** 27-0409051

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BUTTERS, MARIA E  
15132 SW 158TH PL  
MIAMI, FL 33196 US

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

BUTTERS, MARIA E  
15132 SW 158TH PLACE  
MIAMI, FL 33196 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

04/07/2010

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: BUTTERS, MARIA E  
Address: P.O. BOX 772571  
City-St-Zip: MIAMI, FL 33177

Title: CEO  
Name: BUTTERS, JAMES R  
Address: P.O. BOX 772571  
City-St-Zip: MIAMI, FL 33177

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: RICHARD JAMES BUTTERS

CEO

04/07/2010

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