

## **2012 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L10000055796

**FILED**  
**Nov 26, 2012**  
**Secretary of State**

**Entity Name:** JJ&T QUALITY BUILDERS AND RESTORATION LLC.

**Current Principal Place of Business:**

215 E. BOBE ST.  
PENSACOLA, FL 32503

**New Principal Place of Business:**

**Current Mailing Address:**

215 E. BOBE ST.  
PENSACOLA, FL 32503

**New Mailing Address:**

**FEI Number:** 32-0308536

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ALLEN, JAMES E JR.  
215 E. BOBE ST.  
PENSACOLA, FL 32503 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  
**Name:** ALLEN, JAMES E JR  
**Address:** 215 E. BOBE ST.  
**City-St-Zip:** PENSACOLA, FL 32503

**Title:** MGRM  
**Name:** ALLEN, TYRONE L SR.  
**Address:** 1350 RULE ST  
**City-St-Zip:** PENSACOLA, FL 32526

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:** JAMES E. ALLEN JR.

MGRM

11/26/2012

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