

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000094181

**FILED**  
**Apr 30, 2012**  
**Secretary of State**

**Entity Name:** AJSLAM ENTERPRISES LLC

**Current Principal Place of Business:**

1039 COLLINSWOOD DR W  
JACKSONVILLE, FL 32225 US

**New Principal Place of Business:**

2367 HUCKINS CT  
JACKSONVILLE, FL 32225 US

**Current Mailing Address:**

1039 COLLINSWOOD DR W  
JACKSONVILLE, FL 32225 US

**New Mailing Address:**

2367 HUCKINS CT  
JACKSONVILLE, FL 32225 US

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

JOHNSON, ADRIENNE  
1039 COLLINSWOOD DR W  
JACKSONVILLE, FL 32225 US

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

JOHNSON, ADRIENNE  
2367 HUCKINS CT  
JACKSONVILLE, FL 32225 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: ADRIENNE JOHNSON

04/30/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: JOHNSON, ADRIENNE  
Address: 2367 HUCKINS CT  
City-St-Zip: JACKSONVILLE, FL 32225 US

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: ADRIENNE JOHNSON

MGR

04/30/2012

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