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SIGNATURE:

SIGNATURE AND TYPED OR

RINTED NAME

OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE

## Jan 28, 2008 08:00 AN **DOCUMENT # M00000002197 Secretary of State** 1. Entity Name JACKDENNY, LLC Principal Place of Business Mailing Address 222 GRAND AVE. 222 GRAND AVE. ENGLEWOOD, NJ 07631 ENGLEWOOD, NJ 07631 01042008 No Chg-LLC CR2E083 (12/07) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 22-3756302 Not Applicable \$5.00 Additional 5. Certificate of Status Desired Fee Required A STATE OF THE STA 5. Name and Address of Current Registered Agent C T CORPORATION SYSTEM DO NOT WRITE 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$138.75 After May 1, 2008 Fee will be \$538.75 9. MANAGING MEMBERS/MANAGERS TITLE MGR SCHMIDT, MICHAEL 222 GRAND AVE. STREET ADORESS - 100000803050 02/05/08-80009-016 138.75 CITY-ST-ZIP ENGLEWOOD, NJ 07631 TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE STREET AODRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-7IP 11. I hereby certify that the information supplied with this jiling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 typical expowered to execute this report as required by Chapter 608, Florida Statutes.

FILED

Daytime Phone #