LIMITED LIABILITY COMPANY **UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # M0200003466

1. Entity Name

JES-JAX, LLC



FILED Apr 25, 2003 8:00 am Secretary of State 04-25-2003 90761 035 ****50.00

DO NOT WRITE IN THIS SPACE								
DO NOT WRITE IN THIS SPACE								
2. Principal Place of Business 3. Mailing Address 180 N. Wacker Drive 180 N. Wa				chan Naine				
Suite, Apt. #, etc.			180 N. Wacker Drive Suite, Apt. #, etc.) DO NOT WRITE IN THIS:	SPACE	
500			500					
City & State			City & State			4. FEI Number	Applied For	
<u>Chic</u>	Chicago, IL		Chicago, IL			61-1437920	Not Applicable	
Zip Le O Le	04	Country USA	Zip 60606	Country USA		5. Certificate of Status Desired	\$5.00 Additional Fee Required	
						7. Name and Address of Current Registered	d Agent	
Name						Services Inc.		
DO NOT WRITE					NRAI Street Address (P.O. Box Number is Not Acceptable).			
IN THIS SPACE					526 = Park Avenue			
IN THIS STACE								
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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.								
FEE IS \$50:00								
Make Check Payable to Florida Department of State								
DUE BY MAY 1								
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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 trustee empowered to execute this report as required by Chapter 608, Florida Statutes.								

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE