

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L04000062423

**Entity Name:** JESSMON LLC

**Current Principal Place of Business:**

520 SW 1 STREET.  
APT #1  
MIAMI, FL 33130

**Current Mailing Address:**

520 SW 1ST STREET  
APT #1  
MIAMI, FL 33130 US

**FEI Number:** 20-3022093

**Certificate of Status Desired:** No

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

DEHOMBRE, MARIA C  
520 SW 1ST STREET  
APT #1  
MIAMI, FL 33130 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

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGR  
Name DEHOMBRE, MARIA CPRES  
Address 520 SW 1 STREET  
APT #1  
City-State-Zip: MIAMI FL 33130

Title MGR  
Name DEHOMBRE, JOSE EVICEPRE  
Address 520 SW 1 STREET  
APT #1  
City-State-Zip: MIAMI FL 33130

*I hereby certify that the information indicated on this report or supplemental 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 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MARIA C. DEHOMBRE

**PRES**

**03/06/2015**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date