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: JENNIFER SANES

Electronic Signature of Signing Authorized Person(s) Detail

Authorized Person(s) Detail ·

Authorized Person(s) Detail :				
Title	MGR	Title	CFO	
Name	JAT, LLC	Name	SANES, JENNIFER	
Address	6951 W. SUNRISE BLVD.	Address	6951 W. SUNRISE BLVD.	
City-State-Zip:	PLANTATION FL 33313	City-State-Zip:	PLANTATION FL 33313	

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.

Entity Name: 6951 W. SUNRISE BLVD., LLC

Current Principal Place of Business:

6951 W. SUNRISE BLVD. PLANTATION. FL 33313

Current Mailing Address:

DOCUMENT# L06000110120

6951 W. SUNRISE BLVD. PLANTATION. FL 33313

FEI Number: 20-0591317

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

SASTRE, CESAR 6951 W. SUNRISE BLVD. PLANTATION, FL 33313 US

SIGNATURE:

FILED Mar 15, 2017 Secretary of State CC4740686137

Certificate of Status Desired: No

City-State-Zip: PLANTATION FL 33313

03/15/2017 Date

Date

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

CFO