

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000083437

Entity Name: CAJTDM LLC

Current Principal Place of Business:

1005 COLLEGE BLVD WEST STE A
NICEVILLE, FL 32578

Current Mailing Address:

1005 COLLEGE BLVD WEST STE A
NICEVILLE, FL 32578

FEI Number: 26-3274166

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BURKE, DARLENE K
239 WAVA AVE
NICEVILLE, FL 32578 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 BURKE, DARLENE K
Address 1005 COLLEGE BLVD STE A
City-State-Zip: NICEVILLE FL 32578

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: DARLENE BURKE

MGR

03/24/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date