

**2014 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L12000040196

**Entity Name:** JENRIN LLC

**Current Principal Place of Business:**

920 COCO PLUM WAY  
PLANTATION, FL 33324

**Current Mailing Address:**

920 COCO PLUM WAY  
PLANTATION, FL 33324 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

HIRSCH, GARY  
920 COCO PLUM WAY  
PLANTTION, FL 33324 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 MGRM  
Name STRICKMAN, JENNIFER  
Address 920 COCO PLUM WAY  
City-State-Zip: PLANTATION FL 33324

Title MANAGER  
Name GUERRERO, MARCELO  
Address 920 COCO PLUM WAY  
City-State-Zip: PLANTATION FL 33324

Title MANAGER  
Name HIRSCH, GARY  
Address 920 COCO PLUM WAY  
City-State-Zip: PLANTATION FL 33324

Title MGRM  
Name HIRSCH, GARY AND MIRIT TBE  
Address 920 COCO PLUM WAY  
City-State-Zip: DAVIE FL 33324

Title MANAGER  
Name STRICKMAN, HOWARD  
Address 920 COCO PLUM WAY  
City-State-Zip: PLANTATION FL 33324

*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:** GARY HIRSCH

MANAGER

08/08/2014

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

\_\_\_\_\_  
Date