2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 29, 2016
Secretary of State
CC4507967183

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Entity Name: INVJAXPROP LLC

Current Principal Place of Business:

3617 CROWN POINT ROAD
SUITE 10
JACKSONVILLE, FL 32257

Current Mailing Address:

P O BOX 57487
JACKSONVILLE, FL 32241

FEI Number: 46-5766909

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

THE PROF OFFICES OF M A HERNANDEZ LLC
3617 CROWN POINT ROAD
SUITE # 10
JACKSONVILLE, FL 32257 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	HOUSE, THOMAS R
Address	3617- 10 CROWN POINT ROAD
City-State-Zip:	JACKSONVILLE FL 32257

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: THOMAS R HOUSE MGRM 04/29/2016

Electronic Signature of Signing Authorized Person(s) Detail — Date