

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000210501

Entity Name: KAJAMOJO SOLUTIONS, L.L.C.

Current Principal Place of Business:

C/O KAJAMOJO SOLUTIONS, L.L.C.
201 COMMONWEALTH BLVD STE F
PORT ORANGE, FL 32127

Current Mailing Address:

P.O. BOX 238625
PORT ORANGE, FL 32123 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SABRY, MOHAMAD F
C/O KAJAMOJO SOLUTIONS, L.L.C.
201 COMMONWEALTH BLVD STE F
PORT ORANGE, FL 32127 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 SABRY, MOHAMAD F
Address P.O. BOX 238625
City-State-Zip: PORT ORANGE FL 32123

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: MOHAMAD SABRY

MGR

04/30/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date