

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000078585

**Entity Name:** JCMG LLC

**Current Principal Place of Business:**

1420 CELEBRATION BLVD  
STE 200  
CELEBRATION, FL 34747

**Current Mailing Address:**

1420 CELEBRATION BLVD  
STE 200  
CELEBRATION, FL 34747 US

**FEI Number:** 35-2755509

**Certificate of Status Desired:** No

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

MONTE CASTELLANOS, GUILLERMO A  
1420 CELEBRATION BLVD  
STE 200  
CELEBRATION, FL 34747 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 AMBR  
Name MONTE CASTELLANOS, GUILLERMO A  
Address 1420 CELEBRATION BLVD  
STE 200  
City-State-Zip: CELEBRATION FL 34747

Title AMBR  
Name COCA GONZALEZ, CARMEN O  
Address 1420 CELEBRATION BLVD  
STE 200  
City-State-Zip: CELEBRATION FL 34747

Title AMBR  
Name MONTE COCA, MARIA C  
Address 1420 CELEBRATION BLVD  
STE 200  
City-State-Zip: CELEBRATION FL 34747

*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:** MARIA C MONTE COCA

**MANAGER**

**04/30/2024**

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

\_\_\_\_\_  
Date