

# 2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000100891

FILED  
Jan 29, 2012  
Secretary of State

**Entity Name:** CLF FINANCIAL SOLUTIONS LLC

**Current Principal Place of Business:**

15912 W. WIND CIRCLE  
SUNRISE, FL 33326

**New Principal Place of Business:**

**Current Mailing Address:**

15912 W. WIND CIRCLE  
SUNRISE, FL 33326

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired (X)**

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

HARPER, ABILENE MRS.  
15911 W. WIND CIRCLE  
SUNRISE, FL 33326 US

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

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

**MANAGING MEMBERS/MANAGERS:**

Title: MGR  
Name: FERNANDEZ, CARMEN MRS.  
Address: 15912 W WIND CIRCLE  
City-St-Zip: SUNRISE, FL 33326

Title: MGRM  
Name: FERNANDEZ, DANIEL MR.  
Address: 15912 W WIND CIRCLE  
City-St-Zip: SUNRISE, FL 33326

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: CARMEN FERNANDEZ

MGR

01/29/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date