## 2018 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000031370

**Entity Name: EQUIFINANCIAL LLC** 

**Current Principal Place of Business:** 

Current Frincipal Flace of B

1717 N. BAYSHORE DR. 208

MIAMI, FL 33132

**Current Mailing Address:** 

1717 N. BAYSHORE DR.

208

MIAMI, FL 33132

FEI Number: 84-1645235 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILSON, DAVID L 1717 N. BAYSHORE DR. SUITE 208

MIAMI, FL 33132 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: DAVID L. WILSON 10/03/2018

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

Title MGR

Name WILSON, DAVID L

Address 1717 N. BAYSHORE DR. SUITE 208

City-State-Zip: MIAMI FL 33132

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: DAVID L. WILSON MANAGING MEMBER 10/03/2018

FILED Oct 03, 2018

**Secretary of State** 

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