

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L05000044003

**Entity Name:** SUMMIT FINANCIAL MANAGEMENT, LLC

**Current Principal Place of Business:**

WELLS FARGO CENTER  
333 SE 2ND AVE 2830  
MIAMI, FL 33131

**Current Mailing Address:**

WELLS FARGO CENTER  
333 SE 2ND AVENUE SUITE 2830  
MIAMI, FL 33131 US

**FEI Number:** 74-3143915

**Certificate of Status Desired:** No

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

ROTHBARD, MARTIN  
2875 NE 191ST STREET, STE. 703  
AVENTURA, FL 33180 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            PRINCIPAL, CEO  
Name            KAMINSKY, ILYA  
Address        WELLS FARGO CENTER  
                  333 SE 2ND AVENUE SUITE 2830  
City-State-Zip: MIAMI FL 33131

*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:** ILYA KAMINSKY

**MANAGER**

**02/18/2019**

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

\_\_\_\_\_  
Date