### 2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L07000014834

### Entity Name: MUTUAL RELIANCE FINANCIAL GROUP, LLC

#### **Current Principal Place of Business:**

11767 S. DIXIE HWY #354 PINECREST, FL 33156-4438

### **Current Mailing Address:**

100 ALMERIA AVENUE, STE. 230 CORAL GABLES, FL 33134

## FEI Number: 51-0627053

### Name and Address of Current Registered Agent:

SHABSELS, MARIN S 20900 N.E. 30TH AVE, SUITE 600 C/O ROSENTHAL ROSENTHAL RASCO KAPLAN, LLC AVENTURA, FL 33180 US Certificate of Status Desired: No

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

### Authorized Person(s) Detail :

Title	MGR	Title	MGRM
Name	JELKE, BILL	Name	SANDRI, DAVID M
Address	11767 S. DIXIE HWY #354	Address	100 ALMERIA AVE., STE. 230
City-State-Zip:	PINECREST FL 33156-4438	City-State-Zip:	CORAL GABLE FL 33134
Title	MGRM		
Name	JELKE, THOMAS B		
Address	100 ALMERIA AVE., STE. 230		
City-State-Zip:	CORAL GABLE FL 33134		

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

03/11/2013

Date

Electronic Signature of Signing Authorized Person(s) Detail

MGRM

Date

# FILED Mar 11, 2013 Secretary of State CC8820720673