

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000003590

**Entity Name:** SIL TALON SECURITIES FL, LLC

**Current Principal Place of Business:**

3979 BUFORD HWY  
120  
ATLANTA, GA 30345

**Current Mailing Address:**

3979 BUFORD HWY  
120  
ATLANTA, GA 30345 US

**FEI Number:** 27-1519517

**Certificate of Status Desired:** No

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

NRAI SERVICES, INC.  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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	MGR	Title	VP/CFO
Name	JONES, TIM	Name	WATTS, KATHY A
Address	300 SOUTH POINTE DRIVE 1805	Address	3979 BUFORD HWY 120
City-State-Zip:	MIAMI BEACH FL 33139	City-State-Zip:	ATLANTA GA 30345

*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:** KATHY A WATTS

VP/CFO

01/07/2015

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

\_\_\_\_\_  
Date