

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000020807

**Entity Name:** FACTION CAPITAL, LLC

**Current Principal Place of Business:**

100 N BISCAYNE BLVD  
1607  
MIAMI, FL 33132

**Current Mailing Address:**

100 N BISCAYNE BLVD  
1607  
MIAMI, FL 33132 US

**FEI Number:** 27-2567272

**Certificate of Status Desired:** No

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

RESNICK, AARON R  
100 N BISCAYNE BLVD  
1607  
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:**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MANAGER  
Name BREEN, LOGAN C  
Address 100 N BISCAYNE BLVD  
1607  
City-State-Zip: MIAMI FL 33132

Title MANAGER  
Name RESNICK, AARON  
Address 100 N BISCAYNE BLVD  
1607  
City-State-Zip: MIAMI FL 33132

Title AUTHORIZED MEMBER  
Name BREEN, LOGAN C  
Address 100 N BISCAYNE BLVD  
1607  
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:** AARON RESNICK

**MGR**

**04/14/2016**

Electronic Signature of Signing Authorized Person(s) Detail

Date