

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000096167

**Entity Name:** RES-MO ONE, LLC

**Current Principal Place of Business:**

790 NW 107TH AVENUE, SUITE 400  
MIAMI, FL 33172

**Current Mailing Address:**

790 NW 107TH AVENUE, SUITE 400  
MIAMI, FL 33172 US

**FEI Number:** 27-3511606

**Certificate of Status Desired:** No

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

C T CORPORATION SYSTEM  
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 MGRM  
Name MULTIBANK 2009-I RES-ADC  
VENTURE, LLC  
Address 790 NW 107TH AVENUE, SUITE 400  
City-State-Zip: MIAMI FL 33172

*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:** LORI BUCKLER

**AUTHORIZED SIGNATOR** 03/22/2017

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

\_\_\_\_\_ Date