

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000120030

Entity Name: SFILC MANAGEMENT, LLC

Current Principal Place of Business:

1 N CLEMATIS STREET
SUITE 200
WEST PALM BEACH, FL 33401

Current Mailing Address:

1 N CLEMATIS STREET
SUITE 200
WEST PALM BEACH, FL 33401

FEI Number: 45-5145589

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TABERNILLA, ARMANDO A
1 N CLEMATIS STREET
SUITE 200
WEST PALM BEACH, FL 33401 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, PRESIDENT
Name FANJUL, JOSE F. JR.
Address 1 N CLEMATIS STREET, SUITE 200
City-State-Zip: WEST PALM BEACH FL 33401

Title SECRETARY, MANAGER
Name TABERNILLA, ARMANDO A.
Address 1 N CLEMATIS STREET, SUITE 200
City-State-Zip: WEST PALM BEACH FL 33401

Title SENIOR VICE PRESIDENT
Name BLOMQUIST, ERIK J.
Address 1 N CLEMATIS STREET
SUITE 200
City-State-Zip: WEST PALM BEACH FL 33401

Title VP, FINANCE & TREASURER
Name LONDONO, ALEJANDRO
Address 1 N CLEMATIS STREET
SUITE 200
City-State-Zip: WEST PALM BEACH FL 33401

Title VICE PRESIDENT AND CHIEF
ACCOUNTING OFFICER
Name HENDI, MEHDI
Address 1 N CLEMATIS STREET
SUITE 200
City-State-Zip: WEST PALM BEACH FL 33401

Title ASSISTGANT SECRETARY
Name SADLER, BENJAMIN
Address 1 N CLEMATIS STREET
SUITE 200
City-State-Zip: WEST PALM BEACH FL 33401

Title ASSISTANT VICE PRESIDENT, TAX
Name JACOBS, NICK
Address 1 N CLEMATIS STREET
SUITE 200
City-State-Zip: WEST PALM BEACH FL 33401

Title ASSISTANT VICE PRESIDENT, TAX
Name RICE, BRIAN D.
Address 1 N CLEMATIS STREET
SUITE 200
City-State-Zip: WEST PALM BEACH FL 33401

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: ARMANDO A. TABERNILLA

**SECRETARY, MANAGER, 04/19/2024
BY LAUREN DUEMIG,
ATTORNEY-IN-FACT**

