

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000137388

**Entity Name:** CFO, LLC

**Current Principal Place of Business:**

203 E RICH AVENUE  
DELAND, FL 32724

**Current Mailing Address:**

203 E RICH AVENUE  
DELAND, FL 32724 US

**FEI Number:** 46-1288340

**Certificate of Status Desired:** No

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

LOWMAN, WILLIAM R. JR., ESQ.  
SHUFFIELD, LOWMAN & WILSON, P.A.  
203 EAST RICH AVENUE  
DELAND, FL 32724 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:** WILLIAM R. LOWMAN, JR.

04/26/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MANAGER
Name	OARE, ROBERT LENN III
Address	13621 NW 112TH AVENUE
City-State-Zip:	ALACHUA FL 32615
Title	MANAGER
Name	BROCKENBROUGH, AUSTIN IV
Address	LOWE, BROCKENBROUGH & COMPANY 1802 BAYBERRY COURT SUITE 400
City-State-Zip:	RICHMOND VA 23226

Title	MANAGER
Name	NEALE, ELIZABETH OARE
Address	9006 DAYFLOWER STREET
City-State-Zip:	PROSPECT KY 40059

*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:** ROBERT LENN OARE, III

MANAGER

04/26/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date