

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000137388

**Entity Name:** CFO, LLC

**Current Principal Place of Business:**

1000 LEGION PLACE  
SUITE 1700  
ORLANDO, FL 32801

**Current Mailing Address:**

PO BOX 612  
DELAND, FL 32721 US

**FEI Number:** 46-1288340

**Certificate of Status Desired:** No

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

LOWMAN, WILLIAM R. JR., ESQ.  
1000 LEGION PLACE  
SUITE 1700  
ORLANDO, FL 32801 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.

04/30/2024

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           NEALE, ELIZABETH OARE  
Address        31880 TORTUGA SHORE LOOP  
City-State-Zip: WESLEY CHAPEL FL 33545

Title           MANAGER  
Name           BROCKENBROUGH, AUSTIN IV  
Address        LOWE, BROCKENBROUGH &  
                  COMPANY  
                  1802 BAYBERRY COURT SUITE 400  
City-State-Zip: RICHMOND VA 23226

*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

04/30/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date