

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000051706

Entity Name: FINANCIAL SOLUTIONS OF NORTH FLORIDA, LLC

Current Principal Place of Business:

605 SWEETWATER BRANCH LANE
ST. JOHNS, FL 32259

Current Mailing Address:

605 SWEETWATER BRANCH LANE
ST. JOHNS, FL 32259 US

FEI Number: 46-5220397

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GOODFRIEND, KELLY K
605 SWEETWATER BRANCH LANE
ST. JOHNS, FL 32259 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 CEO
Name GOODFRIEND, KELLY K
Address 605 SWEETWATER BRANCH LANE
City-State-Zip: ST. JOHNS FL 32259

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: KELLY K. GOODFRIEND

CEO

04/23/2015

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date