

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000117113

**Entity Name:** CSI FORECLOSURES, LLC

**Current Principal Place of Business:**

14 NE 1 AVE  
1002  
MIAMI, FL 33132

**Current Mailing Address:**

14 NE 1 AVE  
1002  
MIAMI, FL 33132 US

**FEI Number:** 47-4439051

**Certificate of Status Desired:** No

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

EATON, ANDREAN ROSE ESQ.  
99 NW 183 STREET  
120  
MIAMI, FL 33169 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:** ANDREAN EATON

05/01/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name SEARS, TYLER O  
Address 14 NE 1 AVE  
200  
City-State-Zip: MIAMI FL 33132

*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:** TYLER SEARS

CEO

05/01/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date