

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000015462

**Entity Name:** FINANCIAL LINK SERVICES MANAGEMENT LLC

**Current Principal Place of Business:**

618 ATLANTIC SHORES BLVD  
STE 102  
HALLANDALE BEACH, FL 33009

**Current Mailing Address:**

618 ATLANTIC SHORES BLVD  
STE 102  
HALLANDALE BEACH, FL 33009

**FEI Number:** 81-5026474

**Certificate of Status Desired:** No

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

FINANCIAL LINK SERVICES INC  
618 ATLANTIC SHORES BLVD  
STE 102  
HALLANDALE, FL 33009 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  
Name FINANCIAL LINK SERVICES, INC.  
Address 618 ATLANTIC SHORES BLVD, 102  
City-State-Zip: HALLANDALE FL 33009

*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:** WILLIAM BOBSON

**PRESIDENT**

**06/26/2018**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date