	<u>2019</u>	<b>FLORIDA</b>	LIMITED	LIABILITY	COMPANY	REINSTATEMENT
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DOCUMENT# L18000050103

Entity Name: ABSTRACT FINANCIAL ASSOCIATES, LLC

### **Current Principal Place of Business:**

9730 NW 15TH CT PEMBROKE PINES. FL 33024

## **Current Mailing Address:**

9730 NW 15TH CT PEMBROKE PINES. FL 33024 US

## FEI Number: 11-3382770

# Name and Address of Current Registered Agent:

RESILARD, MICHAEL 9730 NW 15TH CT PEMBROKE PINES, FL 33024 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: MICHAEL A RESILARD

Electronic Signature of Registered Agent

## Authorized Person(s) Detail :

Title MGR Name **RESILARD, MICHAEL** Address 9730 NW 15TH CT City-State-Zip: PEMBROKE PINES FL 33024

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: MICHAEL A RESILARD

PRINCIPAL

11/13/2019 Date

Electronic Signature of Signing Authorized Person(s) Detail

## FILED Nov 13, 2019 Secretary of State 3332510257CR

Certificate of Status Desired: Yes

11/13/2019 Date