# 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L18000225164

Entity Name: GILLER FINANCIAL GROUP, LLC

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

C/O JASON B. GILLER, P.A. 1111 BRICKELL AVENUE SUITE 1550 MIAMI, FL 33131

# **Current Mailing Address:**

C/O JASON B. GILLER, P.A. 1111 BRICKELL AVENUE SUITE 1550 MIAMI, FL 33131 US

# FEI Number: APPLIED FOR

## Name and Address of Current Registered Agent:

JASON B. GILLER, P.A. 1111 BRICKELL AVENUE SUITE 1550 MIAMI, FL 33131 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

# Authorized Person(s) Detail :

Title	PDS
Name	GILLER, JASON
Address	1111 BRICKELL AVENUE SUITE 1550
City-State-Zip:	MIAMI FL 33131

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.

PDS

SIGNATURE: JASON B. GILLER

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: No

04/25/2019 Date

Date