

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000261554

**Entity Name:** COLLATERAL NETWORK LLC

**Current Principal Place of Business:**

2053 SW OAKWATER PT  
PALM CITY, FL 34990

**Current Mailing Address:**

2053 SW OAKWATER PT  
PALM CITY, FL 34990 US

**FEI Number: 83-2532369**

**Certificate of Status Desired: No**

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

BARTLETT, JUSTIN J  
2053 SW OAKWATER PT  
PALM CITY, FL 34990 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	Title	MGR
Name	BARTLETT, JUSTIN J	Name	RAMBUSKI-SALZMAN, TYLER R
Address	2053 SW OAKWATER PT	Address	1255 THOMAS DRIVE
City-State-Zip:	PALM CITY FL 34990	City-State-Zip:	WOODSTOCK IL 60098

*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: JUSTIN J BARTLETT**

**PRESIDENT**

**03/12/2020**

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

\_\_\_\_\_  
Date