

2024 FOREIGN LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# M02000003259

Entity Name: CAPITALSOURCE FINANCE LLC

Current Principal Place of Business:

3 MACARTHUR PLACE
SANTA ANA, CA 92707

Current Mailing Address:

3 MACARTHUR PLACE
SANTA ANA, CA 92707 US

FEI Number: 26-0563180

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 EVP AND MANAGING DIRECTOR
Name SOTOODEH, JOHN
Address 3 MACARTHUR PLACE
City-State-Zip: SANTA ANA CA 92707

Title TREASURER
Name SPARKS, MONICA
Address 3 MACARTHUR PLACE
City-State-Zip: SANTA ANA CA 92707

Title SVP AND CFO
Name RINDONE, RAYMOND
Address 3 MACARTHUR PLACE
City-State-Zip: SANTA ANA CA 92707

Title CHIEF LEGAL OFFICER
Name DOTAN, IDO
Address 3 MACARTHUR PLACE
City-State-Zip: SANTA ANA CA 92707

Title SECRETARY
Name LAM, CONNIE
Address 3 MACARTHUR PLACE
City-State-Zip: SANTA ANA CA 92707

Title MANAGER
Name CAPITALSOURCE TRS LLC
Address 3 MACARTHUR PLACE
City-State-Zip: SANTA ANA CA 92707

Title PRESIDENT, CEO AND CHIEF CREDIT OFFICER
Name HUSSAIN, HAMID
Address 3 MACARTHUR PLACE
City-State-Zip: SANTA ANA CA 92707

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: IDO DOTAQN

CHIEF LEGAL OFFICER

06/14/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date