

2013 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M09000002058

Entity Name: RIALTO CAPITAL MANAGEMENT, LLC**Current Principal Place of Business:**730 NW 107TH AVENUE, SUITE 400
MIAMI, FL 33172**Current Mailing Address:**730 NW 107TH AVENUE, SUITE 400
MIAMI, FL 33172**FEI Number:** 26-4136837**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	PRES
Name	KRASNOFF, JEFFREY P
Address	730 NW 107TH AVENUE, SUITE 400
City-State-Zip:	MIAMI FL 33172

Title	CEO
Name	MILLER, STUART A
Address	700 NW 107TH AVENUE, 2ND FLOOR
City-State-Zip:	MIAMI FL 33172

Title	CFO
Name	SALZMAN , THEKLA
Address	730 NW 107TH AVENUE, SUITE 400
City-State-Zip:	MIAMI FL 33172

Title	SVP
Name	SUSTANA, MARK
Address	700 NW 107TH AVENUE, 2ND FLOOR
City-State-Zip:	MIAMI FL 33172

Title	VP
Name	BESSETTE, DIANE
Address	700 NW 107TH AVENUE, 2ND FLOOR
City-State-Zip:	MIAMI FL 33172

Title	VP
Name	GROSS, BRUCE
Address	700 NW 107TH AVENUE, 2ND FLOOR
City-State-Zip:	MIAMI FL 33172

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: THEKLA SALZMAN

CFO

04/08/2013

Electronic Signature of Signing Authorized Person(s) Detail_____
Date