

**2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M12000002639

**Entity Name:** COLLATERAL MANAGEMENT APPRAISAL LLC

**Current Principal Place of Business:**

109 E 17TH ST. #3722  
CHEYENNE, WY 82001

**FILED**  
**Jan 29, 2014**  
**Secretary of State**  
**CC2795569414**

**Current Mailing Address:**

1512 E BROWARD BLVD  
104  
FORT LAUDERDALE, FL 33301 US

**FEI Number: 27-4431054**

**Certificate of Status Desired: No**

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

MASSAD, JESSICA  
1512 E BROWARD BLVD  
104  
FORT LAUDERDALE, FL 33301 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 MGRM  
Name MASSAD, JESSICA  
Address 1512 E BROWARD BLVD  
104  
City-State-Zip: FORT LAUDERDALE FL 33301

*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: JESSICA MASSAD**

**MANAGER**

**01/29/2014**

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

\_\_\_\_\_  
Date