

2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M13000005458

Entity Name: BRFC 2013-A LLC

Current Principal Place of Business:

4950 COMMUNICATION AVE. STE 900
BOCA RATON, FL 33431

Current Mailing Address:

4950 COMMUNICATION AVE. STE 900
BOCA RATON, FL 33431

FEI Number: 46-3185731

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATE CREATIONS NETWORK INC.
801 US HIGHWAY 1
NORTH PALM BEACH, FL 33408 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
Name GRIER, JAMES L
Address 2711 CENTERVILLE RD SUITE 400
City-State-Zip: WILMINGTON DE 19808

Title MGR, PRESIDENT
Name VACANT, VACANT
Address 4960 CONFERENCE WAY NORTH SUITE 100
City-State-Zip: BOCA RATON FL 33431

Title MGR, VP, TREASURER
Name PULEO, ANTHONY M
Address 4960 CONFERENCE WAY NORTH SUITE 100
City-State-Zip: BOCA RATON FL 33431

Title VP
Name WARDAK, AHMAD
Address 4950 COMMUNICATION AVE. STE 900
City-State-Zip: BOCA RATON FL 33431

Title VP
Name GILL, EVERETT
Address 4950 COMMUNICATION AVE. STE 900
City-State-Zip: BOCA RATON FL 33431

Title VP
Name HUMPHREY, PAUL
Address 4950 COMMUNICATION AVE. STE 900
City-State-Zip: BOCA RATON FL 33431

Title S
Name DE LA OSA, JORGE
Address 4950 COMMUNICATION AVE. STE 900
City-State-Zip: BOCA RATON FL 33431

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: JORGE DE LA OSA

**SECRETARY, BY ANA
MANZANO, ATTORNEY-
IN-FACT**

04/22/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date