2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M13000007375

Entity Name: SEMINOLE FUNDING RESOURCES, LLC

Current Principal Place of Business:

516 LAKEVIEW RD VILLA III CLEARWATER, FL 33756

Current Mailing Address:

516 LAKEVIEW RD VILLA III CLEARWATER, FL 33756

FEI Number: 27-2049522

Name and Address of Current Registered Agent:

MATHIASON, MARION P ESQ 455 N INDIAN ROCKS RD STE B BELLEAIR BLUFFS, FL 33770 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

Authorized Person(s) Detail :

| Title | MANAGER | Title | MANAGER |
|-----------------|--------------------------------|-----------------|--------------------------------|
| Name | BANKS, ROBERT J | Name | FETTER, TIMOTHY S |
| Address | 455 N INDIAN ROCKS RD STE B | Address | 455 N INDIAN ROCKS RD STE B |
| City-State-Zip: | BELLAIR BLUFFS FL 33770 | City-State-Zip: | BELLEAIR BLUFFS FL 33770 |
| Title | MANAGER | | |
| Name | DIAZ, CHRIS G | | |
| Address | 455 N INDIAN ROCKS RD STE B | | |
| City-State-Zip: | BELLEAIR BLUFFS FL 33770 | | |
| | | | |

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: TIMOTHY FETTER

MANAGER

03/19/2020

Date

Electronic Signature of Signing Authorized Person(s) Detail

Date

FILED Mar 19, 2020 Secretary of State 2679478291CC

Certificate of Status Desired: No