## **2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M15000007813

Entity Name: AMERIFACTORS FINANCIAL GROUP, LLC

**Current Principal Place of Business:** 

200 ST. CHARLES AVENUE NEW ORLEANS. LA 70130

**Current Mailing Address:** 

200 ST. CHARLES AVENUE NEW ORLEANS. LA 70130

**FEI Number: NOT APPLICABLE** 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: JAMES M. HALPIN 01/21/2019

Electronic Signature of Registered Agent

Date

**FILED** Jan 21, 2019

**Secretary of State** 

1209938282CC

Authorized Person(s) Detail:

Title MGR Title MGR

WILLIAMS, GUY Name HOLLIER, GREGORY J Name 200 ST. CHARLES AVENUE Address 200 ST. CHARLES AVENUE Address City-State-Zip: NEW ORLEANS LA 70130

NEW ORLEANS LA 70130 City-State-Zip:

Title MGR

HLADKY, WADE Name

Address 200 ST. CHARLES AVENUE City-State-Zip: NEW ORLEANS LA 70130

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: GREGORY J. HOLLIER

**MANAGER** 

01/21/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date