# DOCUMENT# M16000004892

Entity Name: FINANCORP FAMILY OFFICE, LLC

2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

### **Current Principal Place of Business:**

2400 E. COMMERCIAL BOULEVARD, SUITE 825 FORT LAUDERDALE, FL 33308

### **Current Mailing Address:**

411 THEODORE FREMD AVENUE, SUITE 100 NORTH RYE, NY 10580 US

## FEI Number: 81-2956039

### Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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	MGR	Title	MGR	
	Name	BORBERG MENDOZA, EDUARDO JUAN	Name	MENDOZA HERNANDEZ, JUAN LORENZO	
	Address	2400 E. COMMERCIAL BOULEVARD, SUITE 825	Address	2400 E. COMMERCIAL BOULEVARD, SUITE 825	
	City-State-Zip:	FORT LAUDERDALE FL 33308	City-State-Zip:	FORT LAUDERDALE FL 33308	
	Title	MGR	Title	MGR	
	Name	MENDOZA PACHECO, JUAN	Name	LOPEZ, MANUEL SANTIAGO	
	Address	LORENZO CENTRO GERENCIAL MOHEDANO AV MOHEDANO CON CALLE CHAGUARAMOS PISO 12, OFICINA A, LA CASTELLANA	Address	411 THEODORE FREMD AVENUE SUITE 100 NORTH	
			City-State-Zip:	RYE NY 10580	
	City-State-Zip:	CARACAS 1071	Title	MGR MENDOZA HERNANDEZ, SIMON ANTONIO	
	Title	MGR	Name		
	Name	FERRER, ORLANDO	Address	CENTRO GERENCIAL MOHEDANO AV MOHEDANO CON CALLE CHAGUARAMOS PISO 11, OFICINA A Y B, LA CASTELLANA	
	Address	2400 E. COMMERCIAL BOULEVARD, SUITE 825			
	City-State-Zip:	FORT LAUDERDALE FL 33308	City-State-Zip:	CARACAS 1071	
	Title	MGR			
	Name	MERCADO, VICTOR			
	Address	2400 E. COMMERCIAL BOULEVARD, SUITE 825			
	City-State-Zip:	FORT LAUDERDALE FL 33308			
	Title Name	MGR MERCADO, VICTOR	City-State-Zip:		

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:	MANUEL LOPEZ	MANAGER	01/25/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date

Certificate of Status Desired: Yes

Date