

**2025 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M16000005267

**Entity Name:** PANORAMA MORTGAGE GROUP, LLC**Current Principal Place of Business:**6111 S. BUFFALO DRIVE  
SUITE 240  
LAS VEGAS, NV 89113-2328**Current Mailing Address:**6111 S. BUFFALO DRIVE  
SUITE 240  
LAS VEGAS, NV 89113-2328 US**FEI Number:** 20-8083209**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:**

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name MADIEDO, JASON  
Address 6111 S. BUFFALO DRIVE  
SUITE 240  
City-State-Zip: LAS VEGAS NV 89113-2328

Title CHAIRMAN  
Name STEPHEN, GEORGE  
Address 6111 S. BUFFALO DRIVE  
SUITE 240  
City-State-Zip: LAS VEGAS NV 89113-2328

Title PRESIDENT  
Name AMENDOLA, HECTOR  
Address 6111 S. BUFFALO DRIVE  
SUITE 240  
City-State-Zip: LAS VEGAS NV 89113-2328

Title BOARD MEMBER  
Name STAFFORD, MARK T  
Address 6111 S. BUFFALO DRIVE  
SUITE 240  
City-State-Zip: LAS VEGAS NV 89113-2328

Title MGR  
Name NARVAEZ, MIEGUEL A  
Address 6111 S. BUFFALO DRIVE  
SUITE 240  
City-State-Zip: LAS VEGAS NV 89113-2328

Title CHIEF RISK OFFICER  
Name ALCANTARA, KENNETH  
Address 6111 S. BUFFALO DRIVE  
SUITE 240  
City-State-Zip: LAS VEGAS NV 89113-2328

Title EVP & CHAIRMAN ENTERPRISE RISK  
& LEGAL AFFAIRS, BOARD MEMBER  
Name SLAYTON, BEN  
Address 6111 S. BUFFALO DRIVE  
SUITE 240  
City-State-Zip: LAS VEGAS NV 89113-2328

Title BOARD MEMBER  
Name WALSH, DONNA  
Address 6111 S. BUFFALO DRIVE  
SUITE 240  
City-State-Zip: LAS VEGAS NV 89113-2328

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*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:** JASON MADIEDO

CEO

02/13/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date

**Authorized Person(s) Detail Continued :**

Title                    QUALIFIED INDIVIDUAL  
Name                    SANCHEZ-CIFUENTES, AMAURY  
Address                6111 S. BUFFALO DRIVE  
                             SUITE 240  
City-State-Zip:      LAS VEGAS NV 89113-2328

Title                    CFO  
Name                    RICCIO, PHILIP JR.  
Address                6111 S. BUFFALO DRIVE  
                             SUITE 240  
City-State-Zip:      LAS VEGAS NV 89113-2328

Title                    COO  
Name                    CEPEDA, JUAN  
Address                6111 S. BUFFALO DRIVE  
                             SUITE 240  
City-State-Zip:      LAS VEGAS NV 89113-2328