

2024 FOREIGN LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED

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Jul 08, 2024

Entity Name: PANORAMA MORTGAGE GROUP, LLC

Secretary of State

4750206372CC

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 MGR
Name NARVAEZ, MIEGUEL A
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 VP OF MORTGAGE COMPLIANCE
Name ALCANTARA, KENNETH
Address 6111 S. BUFFALO DRIVE
SUITE 240
City-State-Zip: LAS VEGAS NV 89113-2328

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

Title CORPORATE SECRETARY
Name SLAYTON, BEN
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 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

07/08/2024

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