

2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M21000015959

Entity Name: FLEXENTIAL FINANCING LLC

Current Principal Place of Business:

600 FOREST POINT CIRCLE, STE. 100
CHARLOTTE, NC 28273

Current Mailing Address:

600 FOREST POINT CIRCLE, STE. 100
CHARLOTTE, NC 28273 US

FEI Number: 36-5001705

Certificate of Status Desired: No

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

Date

Authorized Person(s) Detail :

Title CEO
Name DOWNIE, CHRISTOPHER W
Address 600 FOREST POINT CIRCLE, STE. 100
City-State-Zip: CHARLOTTE NC 28273

Title VPOT
Name JOHNSON, JILL
Address 600 FOREST POINT CIRCLE, STE. 100
City-State-Zip: CHARLOTTE NC 28273

Title CFO
Name WILLIAMS, GARTH
Address 600 FOREST POINT CIRCLE, STE. 100
City-State-Zip: CHARLOTTE NC 28273

Title SECRETARY
Name SMOLEN, DAVID
Address 188 THE EMBARCADERO SUITE 700
City-State-Zip: SAN FRANCISCO CA 94105

Title GENERAL COUNSEL
Name MEGAN, FINE
Address 600 FOREST POINT CIRCLE, STE. 100
City-State-Zip: CHARLOTTE NC 28273

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: JILL R JOHNSON

VP OF TAXATION

04/29/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date