

**LIMITED LIABILITY COMPANY  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Jul 28, 2004 8:00 am**  
**Secretary of State**

07-28-2004 90099 006 \*\*\*\*50.00

**DOCUMENT #** L00000015110

1. Entity Name

**B G Financial Consulting, L.C.**

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
**1021 Ives Dairy Rd.**

Suite, Apt. #, etc  
**Ste. 115**

City & State  
**Miami, FL**

Zip Country  
**33179 US**

3. Mailing Address  
**1021 Ives Dairy Rd.**

Suite, Apt. #, etc.  
**Ste. 115**

City & State  
**Miami, FL**

Zip Country  
**33179 US**

4. FEI Number  
**65-1067007**

Applied For  
Not Applicable

DO NOT WRITE IN THIS SPACE

5. Certificate of Status Desired ☐ \$5.00 Additional Fee Required

7. Name and Address of Current Registered Agent

Name  
**Brian J. Gorsuch**

Street Address (P.O. Box Number is Not Acceptable)  
**3600 Mystic Pointe Dr.**

#917

City  
**Aventura**

FL Zip Code  
**33180**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

**Brian J. Gorsuch**

**7/15/2004**

Signature, typed or printed name of registered agent and title if applicable.

DATE

FEE IS \$50.00

Make Check Payable to Department of State  
DUE BY MAY 1

**9. MANAGING MEMBERS/MANAGERS**

TITLE  
**MGRM**  
NAME  
**Brian J. Gorsuch**  
STREET ADDRESS  
**3600 Mystic Pointe Dr., #917**  
CITY-ST-ZIP  
**Aventura, FL 33180**

TITLE  
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**DO NOT WRITE  
IN THIS SPACE**

11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 608, Florida Statutes.

SIGNATURE

**Brian Gorsuch**

**7/15/2004**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #