

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

**L02000031772**

DOCUMENT # L02000031772

1. Entity Name

NEW ALLIANCE FUNDING, LLC



FILED  
03 DEC -1 AM 9:26  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business  
14211 COMMERCE WAY

Suite, Apt. #, etc.

3. Mailing Address  
14211 COMMERCE WAY

Suite, Apt. #, etc.

City & State  
MIAMI LAKES, FL

City & State  
MIAMI LAKES, FL

Zip  
33016

Country

Zip  
33016

Country

4. FEI Number

☒ Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐

**\$5.00** Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name FERNANDO BASTILLO

Street Address (P.O. Box Number is Not Acceptable)

14211 COMMERCE WAY

City MIAMI LAKES

FL

Zip Code  
33016

**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

*[Signature]*

DATE

FEE IS \$50.00

Make Check Payable to Florida Department of State  
DUE BY MAY 1

9. MANAGING MEMBERS / MANAGERS

TITLE  
NAME (MGRM) FERNANDO BASTILLO  
STREET ADDRESS 14211 COMMERCE WAY  
CITY-ST-ZIP MIAMI LAKES, FL 33016

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300025236423  
12/04/03--01036--006 \*\*50.00  
*[Signature]*

**DO NOT WRITE  
IN THIS SPACE**

**REINSTATEMENT 2003**  
*[Signature]*

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:

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

Date

Daytime Phone #

CR2E083B (12/02)

LD2000031772

TO: DIVISION OF CORPORATION  
P.O. BOX 6327  
TALLAHASSEE, FL 32314

FILED  
DEC -1 AM 9:26  
03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

TO WHOM IT MAY CONCERN:

I NEVER RECEIVED ANY NOTICE FROM YOUR OFFICE FOR THE 2003  
UNIFORM BUSINESS REPORT.

I MADE A CHANGE IN BANKING ACCOUNTS WHEN I FOUND OUT  
THAT I WAS NOT ACTIVE WITH YOUR OFFICE. PLEASE TAKE THIS  
LETTER AS AN EXCUSE TO PUT MY CORPORATION IN ITS ACTIVE  
STATUS AND TO WAIVE ANY LATE FEES.

THANK YOU IN ADVANCE FOR YOUR PROMPT ATTENTION IN THIS  
MATTER.

CORDIALLY,

  
FERNANDO BASTILLO  
MGRM