

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000097171

**Entity Name:** SFL TITLE LLC

**Current Principal Place of Business:**

300 ARAGON AVE  
STE 214  
CORAL GABLES, FL 33134

**Current Mailing Address:**

300 ARAGON AVE  
STE 214  
CORAL GABLES, FL 33134 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BETOR, RICHARD  
300 ARAGON AVE  
STE 214  
CORAL GABLES, FL 33134 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	MANAGER	Title	MANAGER
Name	BETOR, RICHARD	Name	ROEMER, CHRISTOPHER B. ESQ.
Address	300 ARAGON AVE STE 214	Address	300 ARAGON AVE STE 214
City-State-Zip:	CORAL GABLES FL 33134	City-State-Zip:	CORAL GABLES FL 33134

*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:** RICHARD BETOR

MANAGER

04/18/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date