## 2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000097171

Entity Name: SFL TITLE LLC

**FILED** Apr 28, 2025 **Secretary of State** 5554687202CC

## **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** 

BETOR, RICHARD ROEMER, CHRISTOPHER B. ESQ. Name Name

300 ARAGON AVE 300 ARAGON AVE Address Address STE 214

**STE 214** 

City-State-Zip: CORAL GABLES FL 33134 City-State-Zip: CORAL GABLES FL 33134

Title MANAGER

Name GUEITS, JAMES P. ESQ.

Address 300 ARAGON AVE

**STE 214** 

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.

Electronic Signature of Signing Authorized Person(s) Detail