

**2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M10000003781

**Entity Name:** LENDERVEND, LLC

**Current Principal Place of Business:**

700 AIRPORT BLVD  
SUITE 430  
BURLINGAME, CA 94010

**Current Mailing Address:**

8627 N. MOPAC EXPY  
SUITE 475  
AUSTIN, TX 78759 US

**FEI Number:** 27-0938543

**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 AUTHORIZED MEMBER  
Name PICA, R. CRAIG  
Address 700 AIRPORT BLVD, SUITE 430  
City-State-Zip: BURLINGAME CA 94010

Title AUTHORIZED MEMBER  
Name PICA, DOUG  
Address 700 AIRPORT BLVD, SUITE 430  
City-State-Zip: BURLINGAME CA 94010

Title AUTHORIZED MEMBER  
Name BLAKE, MICHELLE  
Address 700 AIRPORT BLVD, SUITE 430  
City-State-Zip: BURLINGAME CA 94010

Title MGR  
Name GITMAN, JAY  
Address 8627 N. MOPAC EXPY  
SUITE 475  
City-State-Zip: AUSTIN TX 78759

Title AUTHORIZED REPRESENTATIVE  
Name BARRETT, MICHAEL  
Address 700 AIRPORT BLVD, SUITE 430  
City-State-Zip: BURLINGAME CA 94010

*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:** MICHAEL BARRETT

**AUTHORIZED  
REPRESENTATIVE**

02/02/2021

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_ Date