

**2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M99000000219

**Entity Name:** ALAMO FINANCING L.L.C.

**Current Principal Place of Business:**

6929 N. LAKEWOOD AVENUE, SUITE 100  
MOD 1.2 202  
TULSA, OK 74117-1808

**Current Mailing Address:**

6929 N. LAKEWOOD AVENUE, SUITE 100  
MOD 1.2 202  
TULSA, OK 74117-1808 US

**FEI Number:** 41-1930028

**Certificate of Status Desired:** No

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

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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
Name	WILLEY, RUSSELL A.
Address	600 CORPORATE PARK DR MOD 1.2 202
City-State-Zip:	SAINT LOUIS MO 63105
Title	MANAGER
Name	FIGUEROA, ORLANDO
Address	6929 N. LAKEWOOD AVENUE, SUITE 100 MOD 1.2 202
City-State-Zip:	TULSA OK 74117-1808

Title	MANAGER
Name	TAYLOR, CHRISTINE B.
Address	6929 N. LAKEWOOD AVENUE, SUITE 100 MOD 1.2 202
City-State-Zip:	TULSA OK 74117-1808
Title	MANAGER
Name	TAYLOR, ANDREW C.
Address	6929 N. LAKEWOOD AVENUE, SUITE 100 MOD 1.2 202
City-State-Zip:	TULSA OK 74117-1808

*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:** RUSSELL A. WILLEY

**MANAGER**

**03/05/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date