

**2016 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L03000056048

**Entity Name:** SYNAESTHESIS, LLC

**Current Principal Place of Business:**

25 SE ST LUCIE BLVD.  
STUART, FL 34996

**Current Mailing Address:**

25 SE ST LUCIE BLVD  
STUART, FL 34996 US

**FEI Number: 54-2155703**

**Certificate of Status Desired: No**

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

ANASTON-KARAS, KIM  
25 SE ST LUCIE BLVD  
STUART, FL 34996 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 MGRM  
Name ANASTON-KARAS, JAMES E  
Address 25 SE ST LUCIE BLVD  
City-State-Zip: STUART FL 34996

Title GENERAL PARTNER  
Name LOVE, DEBBIE  
Address 2323 W. STATE ROAD 84  
City-State-Zip: FT. LAUDERDALE, FL 33312

*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: JAMES ANASTON-KARAS**

**REGISTERED AGENT**

**12/08/2016**

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

\_\_\_\_\_  
Date