

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000054195

**Entity Name:** YOGA-SAMSKRUTHAM UNIVERSITY LLC

**Current Principal Place of Business:**

1990  
MAIN STREET SUITE 750  
SARASOTA, FL 34236

**Current Mailing Address:**

1990  
MAIN STREET SUITE 750  
SARASOTA, FL 34236 US

**FEI Number:** 45-2628665

**Certificate of Status Desired:** No

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

BEVOOR, VENKATAKRISHNA VDR  
1990  
MAIN STREET #750  
SARASOTA, FL 34236 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 BEVOOR, VENKATAKRISHNA VDR  
Address 1990  
MAIN STREET #750  
City-State-Zip: SARASOTA FL 34236

Title DIRECTOR  
Name SASTRY, ANAND BHARADWAJ BV  
JR.  
Address I-'B' MAIN ROAD, YEDIYUR  
7TH BLOCK (WEST) JAYANAGAR 627  
City-State-Zip: BENGALURU KARNATAKA , INDIA  
560080

Title DIRECTOR  
Name KASHYAP, PRABHAKAR K PHD  
Address NISARGA LAYOUT,  
BANNERGHATTA 995  
City-State-Zip: BENGALURU KARNATAKA, INDIA  
560083

*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:** BEVOOR , VENKATAKRISHNA V DR

**MGRM**

**02/05/2024**

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

\_\_\_\_\_  
Date