

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000130501

Entity Name: 521FL SYNERGY, LLC

Current Principal Place of Business:

815 NE 82 ST
MIAMI, FL 33138

Current Mailing Address:

PO BOX 530382
MIAMI, FL 33150

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MATTHEWS, CHARLES P
815 NE 82 ST
MIAMI, FL 33138 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	Title	MEMBER
Name	MATTHEWS, CHARLES P	Name	PIERCE, MICHELLE
Address	815 NE 82 ST	Address	815 NE 82 ST
City-State-Zip:	MIAMI FL 33138	City-State-Zip:	MIAMI FL 33138

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: CHARLES MATTHEWS

MM

04/30/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date