

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000127206

**Entity Name:** SYNERGY-GB USA LLC

**Current Principal Place of Business:**

1200 BRICKELL AVE.  
SUITE 1800  
MIAMI, FL 33131

**Current Mailing Address:**

1200 BRICKELL AVE.  
SUITE 1800  
MIAMI, FL 33131 US

**FEI Number:** 46-1261831

**Certificate of Status Desired:** No

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

PARJUS, MARIA  
1535 N PARK DRIVE  
SUITE 104  
WESTON, FL 33326 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 D'AMBROSIO, STEFANO  
Address 1200 BRICKELL AVE. SUITE 1800  
City-State-Zip: MIAMI FL 33131

Title MGRM  
Name PEREYRA, ALFREDO  
Address 1200 BRICKELL AVE. SUITE 1800  
City-State-Zip: MIAMI FL 33131

Title MGRM  
Name RIVERA, JOSE R  
Address 1200 BRICKELL AVE. SUITE 1800  
City-State-Zip: MIAMI FL 33131

Title MGRM  
Name RAMIREZ, ALEXANDER  
Address 1200 BRICKELL AVE SUITE 1800  
City-State-Zip: MIAMI FL 33131

*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:** STEFANO D'AMBROSIO

MGRM

03/10/2015

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

\_\_\_\_\_  
Date