

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000164589

**Entity Name:** CYNERGIZE US, LLC

**Current Principal Place of Business:**

1596 OAK LN  
CLEARWATER, FL 33764

**Current Mailing Address:**

580 VIRGINIA DR  
STE 310  
FORT WASHINGTON, PA 19034 US

**FEI Number:** 46-4364292

**Certificate of Status Desired:** No

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

BARRAM, DANIEL  
1596 OAK LN  
CLEARWATER, FL 33764 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 MGR  
Name BARRAM, LISA J  
Address 1596 OAK LN  
City-State-Zip: CLEARWATER FL 33764

*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:** LISA BARRAM

**MANAGER**

**01/03/2018**

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

\_\_\_\_\_  
Date