

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000016776

**Entity Name:** LYNX PROPERTY SERVICES, LLC

**Current Principal Place of Business:**

12485 SW 137 AVE.  
STE. 309  
MIAMI, FL 33186

**Current Mailing Address:**

12485 SW 137 AVE.  
STE. 309  
MIAMI, FL 33186 US

**FEI Number:** 46-4687042

**Certificate of Status Desired:** No

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

SHOMAR, WASIM  
45 ALMERIA AVE.  
CORAL GABLES, FL 33134 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 SHOMAR, WASIM  
Address 45 ALMERIA AVE.  
City-State-Zip: CORAL GABLES FL 33134

*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:** WASIM SHOMAR

**MANAGER**

**03/09/2015**

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

\_\_\_\_\_  
Date