

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000130098

Entity Name: SYSTEMIC SOLUTIONS CENTER LLC

Current Principal Place of Business:

5973 S.UNIVERSITY DR
DAVIE, FL 33328

Current Mailing Address:

5973 S.UNIVERSITY DR
DAVIE, FL 33328 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WINER, AYALA
5973 S.UNIVERSITY DR
DAVIE, FL 33328 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	VP	Title	MGR
Name	WINER, OREN	Name	WINER, ORTAL
Address	5973 S.UNIVERSITY DR	Address	5973 S.UNIVERSITY DR
City-State-Zip:	DAVIE FL 33328	City-State-Zip:	DAVIE FL 33328

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: OREN WINER

VP

01/13/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date