

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000130098

**Entity Name:** SYSTEMIC SOLUTIONS CENTER LLC

**Current Principal Place of Business:**

1333 S.UNIVERSITY DR  
PLANTATION, FL 33324

**Current Mailing Address:**

14441 JOCKEY CIR NORTH  
DAVIE, FL 33330 US

**FEI Number:** 83-4636027

**Certificate of Status Desired:** No

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

WINER, AYALA  
14441 JOCKEY CIR NORTH  
DAVIE, FL 33330 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  
Name WINER, OREN  
Address 14441 JOCKEY CIR NORTH  
City-State-Zip: DAVIE FL 33330

Title MGR  
Name WINER, ORTAL  
Address 14441 JOCKEY CIR NORTH  
City-State-Zip: DAVIE FL 33330

*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

MR

01/27/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date