

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000008327

**Entity Name:** ASGARD SYSTEMIC INSTITUTE LLC

**Current Principal Place of Business:**

7640 NW 25TH ST  
SUITE 110  
MIAMI, FL 33122

**Current Mailing Address:**

10554 NW 51ST  
DORAL, FL 33178 US

**FEI Number:** 81-5016686

**Certificate of Status Desired:** No

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

BLANCO-URIBE, MARIELA C  
199 OCEAN LANE DRIVE  
610  
KEY BISCAYNE, FL 33149 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:** MARIELA C BLANCO-URIBE

01/22/2019

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name KASSET, ASTRID  
Address 7640 NW 25TH ST, SUITE 110  
City-State-Zip: MIAMI FL 33122

Title MGR  
Name PIÃ±ATE, SHANNON  
Address 10554 NW 51ST  
City-State-Zip: DORAL FL 33178

Title MGR  
Name BLANCO-URIBE, MARIELA  
Address 251 CRANDON BOULEVARD, UNIT 1033  
City-State-Zip: KEY BISCAYNE FL 33149

Title MGR  
Name GAMBOA, AURA  
Address 7640 NW 25TH ST, SUITE 110  
City-State-Zip: MIAMI FL 33122

*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:** MARIELA BLANCO-URIBE

MANAGER

01/22/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date