

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