

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000044641

Entity Name: SAVVI LLC**Current Principal Place of Business:**18213 PINE HAMMOCK BLVD
LUTZ, FL 33548**Current Mailing Address:**18213 PINE HAMMOCK BLVD
LUTZ, FL 33548 US**FEI Number:** 82-4510745**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HARAN, DEAN
2830 BLUESLATE COURT
LAND O LAKES, FL 34638 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	PRESIDENT
Name	SUNDAR, SHASH
Address	18213 PINE HAMMOCK BLVD
City-State-Zip:	LUTZ FL 33548

Title	VP
Name	SUNDAR, ANAND
Address	18213 PINE HAMMOCK BLVD
City-State-Zip:	LUTZ FL 33548

Title	DIRECTOR
Name	SUNDAR, VIKRAM A
Address	18213 PINE HAMMOCK BLVD
City-State-Zip:	LUTZ FL 33548

Title	DIRECTOR
Name	SUNDAR, VEERA A
Address	18213 PINE HAMMOCK BLVD
City-State-Zip:	LUTZ FL 33548

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: ANAND SUNDAR

VP

02/08/2022

Electronic Signature of Signing Authorized Person(s) Detail_____
Date