## 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000093536

Entity Name: SYNAL THERAPEUTIC LLC

**Current Principal Place of Business:** 

1265 NE 150 ST MIAMI, FL 33161

**Current Mailing Address:** 

1265 NE 150 ST MIAMI, FL 33161 US

FEI Number: 83-1638462 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SYNAL, CINTHIA 1265 NE 150 ST MIAMI, FL 33161 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: CINTHIA SYNAL 07/18/2020

Electronic Signature of Registered Agent

Date

FILED Jul 18, 2020

**Secretary of State** 

0863028833CC

Authorized Person(s) Detail:

Title MGR

Name SYNAL, CINTHIA
Address 1265 NE 150 ST
City-State-Zip: MIAMI FL 33161

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: CINTHIA SYNAL OWNER/

Electronic Signature of Signing Authorized Person(s) Detail

OWNER/MANAGER 07/18/2020

Date