

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000272878

**Entity Name:** 360GROUP CLINICAL RESEARCH LLC

**Current Principal Place of Business:**

2130 VAN BUREN STREET  
#206  
HOLLYWOOD, FL 33020

**Current Mailing Address:**

2130 VAN BUREN STREET  
#206  
HOLLYWOOD, FL 33020 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

SUKOS LLC  
2130 VAN BUREN STREET  
#206  
HOLLYWOOD, FL 33020 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 MGR  
Name SUKOS LLC  
Address 2130 VAN BUREN STREET, #206  
City-State-Zip: HOLLYWOOD FL 33020

*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:** FABIAN CONDE

**DIRECTOR**

**02/28/2019**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date