

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000082845

**Entity Name:** APD SYNERGIUM LLC

**Current Principal Place of Business:**

11401 WHEELING DR  
TAMPA, FLORIDA 33625

**Current Mailing Address:**

11401 WHEELING DR  
TAMPA, FLORIDA 33625 UN

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

PORTALATIN, ALEXIS I  
11401 WHEELING DR  
TAMPA, FL 33625 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 AR  
Name PORTALATIN, ALEXIS I  
Address 11401 WHEELING DR  
City-State-Zip: TAMPA 33625

*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:** ALEXIS I. PORTALATIN

**PRINCIPAL**

**06/29/2020**

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

\_\_\_\_\_  
Date