

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000127020

**Entity Name:** PSIQUE Y ASTROS, LLC

**Current Principal Place of Business:**

40 SW 13 ST, SUITE 903  
MIAMI, FL 33130

**Current Mailing Address:**

40 SW 13 ST, SUITE 903  
MIAMI, FL 33130 UN

**FEI Number:** 38-4121380

**Certificate of Status Desired:** No

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

GARANTON, JOSE E  
40 SW 13 ST, SUITE 903  
MIAMI, FL 33130 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            AMBR  
Name            ALLUEVA, AKELIA  
Address        40 SW 13 ST, SUITE 903  
City-State-Zip: MIAMI FL 33130

Title            MGR  
Name            GARANTON, JOSE  
Address        40 SW 13 ST, SUITE 903  
City-State-Zip: MIAMI FL 33130

*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:** JOSE GARANTON

**MGR**

**04/24/2020**

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

\_\_\_\_\_  
Date