

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000263116

Entity Name: ADMINYSY, LLC

Current Principal Place of Business:

15208 LAKE MAURINE DR
ODESSA, FL 33556

Current Mailing Address:

15208 LAKE MAURINE DR
ODESSA, FL 33556

FEI Number: 84-4262220

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FOSTER, TRACY M
15208 LAKE MAURINE DR
ODESSA, FL 33556 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 FOSTER, SHAWN M
Address 15208 LAKE MAURINE DR
City-State-Zip: ODESSA FL 33556

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: SHAWN FOSTER

PRINCIPLE

06/15/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date