# 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L20000340667

Entity Name: SYNERGY SURPLUS SOLUTIONS LLC

## **Current Principal Place of Business:**

7801 POINT MEADOWS DRIVE UNIT 6402 JACKSONVILLE, FL 32256

# **Current Mailing Address:**

7801 POINT MEADOWS DRIVE UNIT 6402 JACKSONVILLE, FL 32256 US

## FEI Number: 86-3940802

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

IMOUKHUEDE, IMOIMION U 7801 POINT MEADOWS DRIVE UNIT 6402 JACKSONVILLE, FL 32256 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

## Authorized Person(s) Detail :

 Title
 MGR

 Name
 IMOUKHUEDE, IMOIMION U

 Address
 7801 POINT MEADOWS DRIVE, UNIT 6402

 City-State-Zip:
 JACKSONVILLE FL 32256

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.

MGR

# SIGNATURE: IMOIMION IMOUKHUEDE

Electronic Signature of Signing Authorized Person(s) Detail

FILED Feb 26, 2024 Secretary of State 9881548067CC

Certificate of Status Desired: No

Date

02/26/2024