

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000481098

**Entity Name:** SUNYAR LLC

**Current Principal Place of Business:**

199 OCEAN LANE DRIVE  
APT 315  
KEY BISCAYNE, FL 33149

**Current Mailing Address:**

199 OCEAN LANE DRIVE  
APT 315  
KEY BISCAYNE, FL 33149 UN

**FEI Number:** 87-3714909

**Certificate of Status Desired:** Yes

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

ARVIZU YELIN, LILIA  
199 OCEAN LANE DRIVE  
APT 315  
KEY BISCAYNE, FL 33149 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 SNYDER, ANA GABRIELA  
Address 1416 BLOOMINGTON BLVD  
City-State-Zip: COLUMBUS OH 43228

Title MGR  
Name RODEHOG LLC  
Address 616 COX STREET  
City-State-Zip: SIMPSONVILLE SC 29681

Title AUTHORIZED MEMBER  
Name RODEGHIERO, BRAD ANTHONY  
Address 616 COX STREET  
City-State-Zip: SIMPSONVILLE SC 29681

Title MGR  
Name ARVIZU YELIN, LILIA  
Address 199 OCEAN LANE DRIVE  
APT 315  
City-State-Zip: KEY BISCAYNE FL 33149  
  
Title AUTHORIZED MEMBER  
Name HOGAN, CHRISTOPHER  
Address 616 COX STREET  
City-State-Zip: SIMPSONVILLE SC 29681

*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:** LILIA ARVIZU YELIN

**MANAGER**

**01/18/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date