

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000175228

**Entity Name:** CYNTOX LLC

**Current Principal Place of Business:**

2105 WEST COUNTY LINE ROAD  
SUITE 1  
JACKSON, NJ 08527

**Current Mailing Address:**

2105 WEST COUNTY LINE ROAD  
SUITE 1  
JACKSON, NJ 08527 US

**FEI Number:** 46-3482354

**Certificate of Status Desired:** No

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

FRIED, SHLOMO  
13601 LARAWAY DRIVE  
C/O GEORGE TOSSAS  
RIVERVIEW, FL 33579 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            MBR  
Name            CYNTOX LIMITED LIABILITY  
                  COMPANY  
Address        64 BEAVER STREET, STE 136  
City-State-Zip: NEW YORK NY 10004

Title            MGR  
Name            FRIED, SHLOMO  
Address        2105 WEST COUNTY LINE ROAD  
City-State-Zip: JACKSON NJ 08527

*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:** SHLOMO FRIED

**MEMBER**

**03/08/2016**

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

\_\_\_\_\_  
Date