

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000115442

Entity Name: SYNERGY BIOLOGICS, LLC**Current Principal Place of Business:**2849 PABLO AVENUE
TALLAHASSEE, FL 32308**Current Mailing Address:**2075 CENTRE POINTE BLVD
SUITE 103
TALLAHASSEE, FL 32308 US**FEI Number:** 47-4822348**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HILL, DAVID A.
2849 PABLO AVENUE
TALLAHASSEE, FL 32308 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/CEO
Name	HILL, DAVID
Address	2849 PABLO AVENUE
City-State-Zip:	TALLAHASSEE FL 32308

Title	CMO
Name	RAMSEY, SHAWN D.O.
Address	2849 PABLO AVENUE
City-State-Zip:	TALLAHASSEE FL 32308

Title	COO
Name	CRUM, LARRY D
Address	2849 PABLO AVENUE
City-State-Zip:	TALLAHASSEE FL 32308

Title	PARTNER
Name	ROBERTS, WILLIAM
Address	2849 PABLO AVENUE
City-State-Zip:	TALLAHASSEE FL 32308

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: LARRY CRUM

COO

01/20/2022

Electronic Signature of Signing Authorized Person(s) Detail_____
Date