

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000070865

**Entity Name:** GENEMAX LLC

**Current Principal Place of Business:**

1680 MICHIGAN AVENUE  
700  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

1680 MICHIGAN AVENUE  
700  
MIAMI BEACH, FL 33139

**FEI Number:** 82-4886671

**Certificate of Status Desired:** No

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

LEVY, LERON  
1680 MICHIGAN AVENUE  
700  
MIAMI BEACH, FL 33139 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 AMBR  
Name LEVY, EHUD  
Address 400 WEST BARROW DRIVE  
City-State-Zip: CHANDLER AZ 85225

Title AMBR  
Name LEVY, TEDHAR  
Address 422 W CENTURY CT  
City-State-Zip: GILBERT AZ 85233

Title MANAGER  
Name LEVY, LERON  
Address 1680 MICHIGAN AVENUE  
700  
City-State-Zip: MIAMI FL 33139  
  
Title AMBR  
Name LEVY, RODDYAN  
Address 3114 N LOS ALTOS DR  
City-State-Zip: CHANDLER, AZ 85224

*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:** LERON LEVY

**MANAGER**

**04/09/2019**

Electronic Signature of Signing Authorized Person(s) Detail

Date