

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000130052

**Entity Name:** SYNTHEON EPICARDIAL LLC

**Current Principal Place of Business:**

13755 S.W. 119TH AVENUE  
MIAMI, FL 33186

**Current Mailing Address:**

13755 S.W. 119TH AVENUE  
MIAMI, FL 33186 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

KOLSKI, STEPHEN J  
2020 PONCE DE LEON BLVD. SUITE 905A  
CORAL GABLES, FL 33134 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            SYNTHEON 2.0, LLC  
Address        13755 S.W. 119TH AVENUE  
City-State-Zip: MIAMI FL 33186

*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:** SEAN MCBRAYER

**MANAGER**

**02/19/2020**

Electronic Signature of Signing Authorized Person(s) Detail

Date