

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000094177

**Entity Name:** CYMMETRY LLC

**Current Principal Place of Business:**

3418 HANDY RD  
SUITE 203  
TAMPA, FL 33618

**Current Mailing Address:**

3612 PALM CROSSING DR  
APT. 203  
TAMPA, FL 33613 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** Yes

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

RIVERA, CYMBELINE D  
3612 PALM CROSSING DR  
APT. 203  
TAMPA, FL 33613 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 AR  
Name RIVERA, CYMBELINE D  
Address 3612 PALM CROSSING DR, APT. 203  
City-State-Zip: TAMPA FL 33613

*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:** CYMBELINE D RIVERA

AR

04/15/2021

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

\_\_\_\_\_  
Date