

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000214859

**Entity Name:** SAREPTA UNIVERSITY OF FLORIDA LLC**Current Principal Place of Business:**1565 QUAIL LAKE DR SUITE F104  
WEST PALM BEACH, FL 33409**Current Mailing Address:**PO BOX 16601  
WEST PALM BEACH, FL 33416 US**FEI Number:** 85-2216449**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DR BAZILME, BATRONY  
1565 QUAIL LAKE DR SUITE F104  
WEST PALM BEACH, FL 33409 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:** DR BAZILME BATRONY

05/01/2022

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	OWNER & PRESIDENT	Title	CO-OWNER & VICE PRESIDENT
Name	DR BAZILME, BATRONY	Name	MOISE, MADJEEN
Address	1565 QUAIL LAKE DR SUITE F104	Address	220 HENTHORNE DR SUITE B15
City-State-Zip:	WEST PALM BCH FL 33409	City-State-Zip:	PALM SPRINGS FL 33461

*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:** DR BAZILME BATRONY

OWNER &amp; PRESIDENT

05/01/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date