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.

MEMBER

SIGNATURE: SYEDA F HUSSAIN

Electronic Signature of Signing Authorized Person(s) Detail

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

## Authorized Person(s) Detail :

Title	AMBR	Title	AMBR
Name	HUSSAIN, SYEDA F	Name	HUSSAIN, SYED A
Address	3111 MAHAN DR STE 23	Address	3111 MAHAN DR STE 23
City-State-Zip:	TALLAHASSEE FL 32308	City-State-Zip:	TALLAHASSEE FL 32308
Title	AMBR		
Name	FATAMA, NARGIS		
Address	3111 MAHAN DR STE 23		
City-State-Zip:	TALLAHASSEE FL 32308		

Certificate of Status Desired: No

Jan 28, 2024 Secretary of State 0363307106CC

Date

01/28/2024

Date

FILED

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

# DOCUMENT# L23000246684

Entity Name: SYEDS ENTERPRISES II LLC

## **Current Principal Place of Business:**

904 THOMASVILLE RD TALLAHASSEE, FL 32303

## **Current Mailing Address:**

3111 MAHAN DR 23 TALLAHASSEE, FL 32308

## FEI Number: 93-1460136

Name and Address of Current Registered Agent:

HUSSAIN, SYEDA F 3111 MAHAN DR 23 TALLAHASSEE, FL 32308 US