

2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M11000002330

Entity Name: SYNEOS HEALTH, LLC

Current Principal Place of Business:

1030 SYNC STREET
MORRISVILLE, NC 27560

Current Mailing Address:

1030 SYNC STREET
MORRISVILLE, NC 27560 US

FEI Number: 33-0723120

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

UNITED AGENT GROUP INC.
801 US HIGHWAY 1
NORTH PALM BEACH, FL 33408 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 MEMBER
Name SYNEOS HEALTH CLINICAL, INC.
Address 1030 SYNC STREET
City-State-Zip: MORRISVILLE NC 27560

Title DIRECTOR
Name KRALOWETZ, DONNA
Address 1030 SYNC STREET
City-State-Zip: MORRISVILLE NC 27560

Title DIRECTOR
Name BROOKS, MICHAEL
Address 1030 SYNC STREET
City-State-Zip: MORRISVILLE NC 27560

Title DIRECTOR
Name OLEFSON, JONATHAN
Address 1030 SYNC STREET
City-State-Zip: MORRISVILLE NC 27560

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: JONATHAN OLEFSON

**DIRECTOR, BY LYNNETTE 04/26/2024
PENALBERT, ATTORNEY-
IN-FACT**

Electronic Signature of Signing Authorized Person(s) Detail

Date