

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000054302

Entity Name: INFLAMACORE LIMITED LIABILITY COMPANY

Current Principal Place of Business:

9133 SW 78 PLACE
MIAMI, FL 33156

Current Mailing Address:

9133 SW 78 PLACE
MIAMI, FL 33156 US

FEI Number: 27-1720526

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GREENE & SANDERS, P.A.
2333 BRICKELL AVENUE
STE A-1
MIAMI, FL 33129 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 MGRM
Name KEANE, ROBERT W
Address 9133 SW 78 PLACE
City-State-Zip: MIAMI FL 33156

Title MGRM
Name DE RIVERO VACCARI, JUAN PABLO
Address 13951 SOUTHWEST 66TH STREET
APT. 406
City-State-Zip: MIAMI FL 33183

Title MGRM
Name DIETRICH, W. DALTON W
Address 720 NW 69TH STREET
8N
City-State-Zip: MIAMI FL 33138

Title MGRM
Name BRAMLETT, HELEN M
Address 720 NE 69TH STREET
8N
City-State-Zip: MIAMI FL 33138

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: ROBERT W KEANE

CSO

01/09/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date