

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000087403

**Entity Name:** THEOVIR LLC

**Current Principal Place of Business:**

100 N BISCAYNE BLVD  
SUITE 3050  
MIAMI, FL 33132

**Current Mailing Address:**

44 W FLAGLER ST  
SUITE 2300  
MIAMI, FL 33130 US

**FEI Number:** 27-0929212

**Certificate of Status Desired:** No

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

EXCO US ATRIUM  
44 WEST FLAGLER STREET  
SUITE 2300  
MIAMI, FL 33130 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:** ALINE DARMOUNI

03/28/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name MICHEL, JEAN-CHRISTOPH  
Address 100 N. BISCAYNE BLVD 2904  
City-State-Zip: MIAMI FL 33132

Title MGRM  
Name MICHEL, SOPHIE  
Address 100 N BISCAYNE BLVD 2904  
City-State-Zip: MIAMI FL 33132

*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:** MICHEL JEAN-CHRISTOPH

MANAGER

03/28/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date