Electronic Signature of Signing Authorized Person(s) Detail

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000093869

Entity Name: AILERON FIXED INCOME FUND I, LLC

Current Principal Place of Business:

3401 WEST CYPRESS STREET SUITE 201 TAMPA, FL 33607

Current Mailing Address:

3401 WEST CYPRESS STREET 201 TAMPA, FL 33607 US

FEI Number: 27-4015549

Name and Address of Current Registered Agent:

BEARD, ROBERT K 3401 WEST CYPRESS STREET SUITE 201 TAMPA, FL 33607 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

Authorized Person(s) Detail :

Title	AUTHORIZED REPRESENTATIVE	Title	AUTHORIZED REPRESENTATIVE
Name	BEARD, ROBERT K	Name	SALEMI, CHRIS D
Address	3401 WEST CYPRESS STREET SUITE 201	Address	3401 WEST CYPRESS STREET SUITE 201
City-State-Zip:	TAMPA FL 33607	City-State-Zip:	TAMPA FL 33607
Title	AUTHORIZED MEMBER		
Name	AILERON HOLDINGS, LLC		
Address	3401 WEST CYPRESS STREET SUITE 201		
City-State-Zip:	TAMPA FL 33607		

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 K. BEARD

AUTHORIZED REPRESENTATIVE 04/26/2021

Date

FILED Apr 26, 2021 Secretary of State 3165623261CC

Certificate of Status Desired: No

Date