

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000044831

**Entity Name:** INFINITY AG SOLUTIONS, LLC

**Current Principal Place of Business:**

12995 S. CLEVELAND AVE STE 208  
FORT MYERS, FL 33907

**Current Mailing Address:**

12995 S CLEVELAND AVE, STE 208  
FORT MYERS, FL 33907 US

**FEI Number:** 45-5034267

**Certificate of Status Desired:** No

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

WINROW, GARY  
8241 ARBORFIELD CT  
FT MYERS, FL 33912 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:** GARY WINROW

04/04/2022

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

|                 |                    |                 |                                |
|-----------------|--------------------|-----------------|--------------------------------|
| Title           | MGR                | Title           | AUTHORIZED REPRESENTATIVE      |
| Name            | WINROW, GARY       | Name            | KAPLAN, ANN                    |
| Address         | 8241 ARBORFIELD CT | Address         | 12995 S CLEVELAND AVE, STE 208 |
| City-State-Zip: | FT MYERS FL 33912  | City-State-Zip: | FORT MYERS FL 33907            |

*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:** ANN KAPLAN

**AUTHORIZED  
REPRESENTATIVE**

04/04/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date