

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000205486

Entity Name: VENTRICPHARM, LLC

Current Principal Place of Business:

4585 PONCE DE LEON BLVD
APT 811
CORAL GABLES, FL 33146

Current Mailing Address:

4585 PONCE DE LEON BLVD
APT 811
CORAL GABLES, FL 33146 US

FEI Number: 61-1778639

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC.
5575 S. SEMORAN BLVD.
SUITE 36
ORLANDO, FL 32822 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 AMBR
Name LARSSON, HANS P
Address 4585 PONCE DE LEON BLVD
APT 811
City-State-Zip: CORAL GABLES FL 33146

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: HANS PETER LARSSON

PRESIDENT

04/10/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date