

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000150342

**Entity Name:** INOVEXIA PARTNERS, L.L.C.

**Current Principal Place of Business:**

825 LAVENDER CIRCLE  
WESTON, FL 33327

**Current Mailing Address:**

825 LAVENDER CIRCLE  
WESTON, FL 33327 BR

**FEI Number: 81-3563016**

**Certificate of Status Desired: Yes**

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

CETRARO, OSCAR A MR.  
15295 SW 107TH LANE  
SUITE 1012  
MIAMI, FL 33196 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	Title	MGRM
Name	PAZ, LUIS A MR.	Name	TORRES, MARIA L MRS.
Address	825 LAVENDER CIRCLE	Address	825 LAVENDER CIRCLE
City-State-Zip:	WESTON FL 33327	City-State-Zip:	WESTON FL 33327

*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: PAZ , LUIS A , MR.**

**MGRM**

**04/30/2019**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date