

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000169819

**Entity Name:** MAYFAIR PHARMA LLC**Current Principal Place of Business:**49 GLOUCESTER PLACE MEWS  
LONDON, ENGLAND W1U8BF**Current Mailing Address:**49 GLOUCESTER PLACE MEWS  
LONDON, ENGLAND W1U8BF GB**FEI Number:** 81-3840672**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MATLUC SERVICES LLC  
2828 CORAL WAY  
SUITE 312  
CORAL GABLES, FL 33145 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:** MARIA UBEID NORONHA, CAROLINA

04/12/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR	Title	MGR
Name	RIBEIRO LIMA BRAGA, MATHEUS	Name	BRAGA AITKEN, MARIANA
Address	49 GLOUCESTER PLACE MEWS	Address	RUA BRIGADEIRO HAROLDO VELOSO 325 - APARTAMENTO 21
City-State-Zip:	LONDON W1U8BF	City-State-Zip:	SAO PAULO SP 04533-080

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:** RIBEIRO LIMA BRAGA , MATHEUS

MGR

04/12/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date