# 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.

MGRM

SIGNATURE: CAMARGO AMBROSIO, FREDERICO E

Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE:

# Electronic Signature of Registered Agent

Authorized Person(s) Detail :			
Title	MGRM	Title	MGRM
Name	AMBROSIO, IRINEU F	Name	CAMARGO AMBROSIO, FREDERICO E
Address	1421 SW 107TH AVENUE 115	Address	1421 SW 107TH AVENUE 115
City-State-Zip:	MIAMI FL 33174	City-State-Zip:	MIAMI FL 33174

## 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.

# **Current Mailing Address:**

**Current Principal Place of Business:** 

1421 SW 107TH AVENUE C/O QUALITY BUSINESS 115 MIAMI, FL 33174 US

### FEI Number: 82-1356422

QUALITY BUSINESS LLC 1421 SW 107TH AVENUE

MIAMI, FL 33174 US

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### Name and Address of Current Registered Agent:

1421 SW 107TH AVENUE 115 MIAMI, FL 33174

### 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT# L17000094540

Entity Name: ALPHA PHARMA INTERNATIONAL LLC

### FILED Apr 16, 2024 Secretary of State 5688761485CC

Certificate of Status Desired: No

04/16/2024 Date

Date