

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000262162

**Entity Name:** ADVANCED SIMULATION PROVIDER LLC

**Current Principal Place of Business:**

2721 EXECUTIVE PARK DR  
STE 4  
WESTON, FL 33331

**Current Mailing Address:**

2721 EXECUTIVE PARK DR  
STE 4  
WESTON, FL 33331 US

**FEI Number:** 83-2537082

**Certificate of Status Desired:** No

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

SALVER & COOK LLP  
2721 EXECUTIVE PARK DR  
STE 4  
WESTON, FL 33331 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  
Name DOMINGUEZ, ANDRES FELIPE  
Address 2721 EXECUTIVE PARK DR STE 4  
City-State-Zip: WESTON FL 33331

Title MGRM  
Name ARANGO, CARLOS ANDRES  
Address 2721 EXECUTIVE PARK DR STE 4  
City-State-Zip: WESTON FL 33331

*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:** DOMINGUEZ , ANDRES FELIPE

MGRM

04/28/2022

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

\_\_\_\_\_  
Date