

**2021 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L19000120173

**Entity Name:** QUIMADH USA LLC

**Current Principal Place of Business:**

4612 N HIATUS RD  
SUNRISE, FL 33351

**Current Mailing Address:**

4612 N HIATUS RD  
SUNRISE, FL 33351 UN

**FEI Number: 83-4632898**

**Certificate of Status Desired: No**

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

BUSINESS SERVICES & SUPPORT NETWORK CORP  
4612 N HIATUS RD  
SUNRISE, FL 33351 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:** ANTOLIN PESTANOJR

02/02/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title AMBR  
Name QUIMADH SRL  
Address GRAL. MIGUEL DE AZCUENGE 2884  
City-State-Zip: SANTO TOME SF 3016

Title MGR  
Name CRESPI, HECTOR O  
Address GRAL. MIGUEL DE AZCUENGE 2884  
City-State-Zip: SANTO TOME SF 3016

Title MGR  
Name GONCEBAT, ISABEL BEATRIZ G  
Address GRAL. MIGUEL DE AZCUENGE 2884  
City-State-Zip: SANTO TOME SF 3016

Title MGR  
Name PESTANO, ANTOLIN  
Address 4612 N HIATUS RD  
City-State-Zip: SUNRISE FL 33351

*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:** ANTOLIN PESTANO

MGR

02/02/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date