2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
May 29, 2020
Secretary of State
3732447680CC

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Entity Name: ASPI ORTHOBIOLOGICS, LLC

Current Principal Place of Business:

5850 W. CYPRESS ST.
TAMPA, FL 33607

Current Mailing Address:

5850 W. CYPRESS ST.
TAMPA, FL 33607

FEI Number: 84-3429356

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MIRANDA, FRANK C
3226 W. CYPRESS ST.
TAMPA, FL 33607 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	AMBR	Title	AMBR
Name	MACLAREN, MALCOLM C	Name	MACLAREN, CATHERINE
Address	5850 W. CYPRESS ST.	Address	5850 W. CYPRESS ST.
City-State-Zip:	TAMPA FL 33607	City-State-Zip:	TAMPA FL 33607
Title	AMBR	Title	AMBR
Name	WILSON, JACOB	Name	LOWERY, RYAN
Address	5850 W. CYPRESS ST.	Address	5850 W. CYPRESS ST.
City-State-Zip:	TAMPA FL 33607	City-State-Zip:	TAMPA FL 33607

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: MALCOLM C. MACLAREN MANAGING PARTNER 05/29/2020

Electronic Signature of Signing Authorized Person(s) Detail — Date