## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000279594

**Entity Name: INFERTOR LLC** 

**Current Principal Place of Business:** 

1701 PONCE DE LEON BLVD CORAL GABLES. FL 33134

**Current Mailing Address:** 

1701 PONCE DE LEON BLVD CORAL GABLES. FL 33134 US

FEI Number: 84-3793577 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FA CORPORATE MANAGEMENT LLC 1701 PONCE DE LEON BLVD CORAL GABLES, FL 33134 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: CLAUDIA MUNOZ 01/30/2024

Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title MANAGER

Name FA CORPORATE MANAGEMENT LLC

1701 PONCE DE LEON BLVD Address City-State-Zip: CORAL GABLES FL 33134

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.

01/30/2024 SIGNATURE: CLAUDIA MUNOZ **MGR** 

**FILED** Jan 30, 2024

**Secretary of State** 

8523906732CC

Date