2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT
DOCUMENT\# L19000281744
Entity Name: INCLODE LLC

## Current Principal Place of Business:

8950 SW 74 CT
STE 1606
MIAMI, FL 33156

## Current Mailing Address:

8950 SW 74 CT
STE 1606
MIAMI, FL 33156 US

FEI Number: 38-4133894
Certificate of Status Desired: No
Name and Address of Current Registered Agent:
PIEDRA REGISTERED AGENTS LLC
8950 SW 74 CT
STE 1606
MIAMI, FL 33156 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
Authorized Person(s) Detail :

| Title | MGR | Title | MGR |
| :---: | :---: | :---: | :---: |
| Name | FRIDMAN, DIEGO H | Name | LUCHETTI, PABLO C |
| Address | $\begin{aligned} & 8950 \text { SW } 74 \text { CT } \\ & \text { STE } 1606 \end{aligned}$ | Address | $\begin{aligned} & 8950 \text { SW } 74 \text { CT } \\ & \text { STE } 1606 \end{aligned}$ |
| City-State-Zip: | MIAMI FL 33156 | City-State-Zip: | MIAMI FL 33156 |
| Title | MGR | Title | MGR |
| Name | POGGI, LUCIANO | Name | STAMBOULIAN, SANTIAGO D |
| Address | $\begin{aligned} & 8950 \text { SW } 74 \text { CT } \\ & \text { STE } 1606 \end{aligned}$ | Address | $\begin{aligned} & 8950 \text { SW } 74 \text { CT } \\ & \text { STE } 1606 \end{aligned}$ |
| City-State-Zip: | MIAMI FL 33156 | City-State-Zip: | MIAMI FL 33156 |
| Title | MGR | Title | AMBR |
| Name | LUCHETTI, MARIANO L | Name | RENDEMED LTD |
| Address | $\begin{aligned} & 8950 \text { SW } 74 \text { CT } \\ & \text { STE } 1606 \end{aligned}$ | Address | $\begin{aligned} & 8950 \text { SW } 74 \text { CT } \\ & \text { STE } 1606 \end{aligned}$ |
| City-State-Zip: | MIAMI FL 33156 | City-State-Zip: | MIAMI FL 33156 |
| Title | MGR |  |  |
| Name | STAMBOULIAN, ROXANA |  |  |
| Address | $\begin{aligned} & 8950 \text { SW } 74 \text { CT } \\ & \text { STE } 1606 \end{aligned}$ |  |  |
| City-State-Zip: | MIAMI FL 33156 |  |  |

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: FRIDMAN , DIEGO H MGR 02/16/2022

