

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000143163

**Entity Name:** IMPEL AMERICA DISTRIBUTOR LLC

**Current Principal Place of Business:**

IMPEL AMERICA DISTRIBUTOR LLC  
8536 NW 66 ST  
MIAMI, FL 33195

**Current Mailing Address:**

IMPEL AMERICA DISTRIBUTOR LLC  
8536 NW 66 ST  
MIAMI, FL 33195 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

MARULANDA, HECTOR V  
8536 NW 66 ST  
MIAMI, FL 33195 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	MARULANDA, HECTOR H	Name	MARULANDA, MARIA L
Address	8536 N.W. 66 ST	Address	8536 N.W. 66 ST
City-State-Zip:	MIAMI FL 33195	City-State-Zip:	MIAMI FL 33195

*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:** HECTOR V. MARULANDA

AMBR

04/12/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date