# 2024 FOREIGN LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# M2200000023

Entity Name: SOLIDUS ADVISORS, LLC

## Current Principal Place of Business:

800 BRICKELL AVENUE 4TH FLOOR SUITE 408 MIAMI, FL 33131

## **Current Mailing Address:**

800 BRICKELL AVENUE 4TH FLOOR SUITE 408 MIAMI, FL 33131 US

## FEI Number: 87-4130130

## Name and Address of Current Registered Agent:

REGISTERED AGENTS INC. 7901 4TH ST N STE 300 ST. PETERSBURG, FL 33702 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 :

Authorized Person(s) Detail :				
	Title	MANAGER	Title	MANAGER
	Name	MOSQUERA BENATUIL, JUAN CARLOS 800 BRICKELL AVENUE, 4TH FLOOR SUITE 408 MIAMI FL 33131	Name	LAUBER ACEVEDO, MARIA VIRGINIA
	Address		Address	800 BRICKELL AVENUE, 4TH FLOOR SUITE 408
	City-State-Zip:		City-State-Zip:	MIAMI FL 33131
	Title	MANAGER SACCO PEREZ SOSA, EDUARDO 800 BRICKELL AVENUE, 4TH FLOOR, SUITE 408	Title	MANAGER
			Name	GANDARA SEDALES, HORACIO
	Name Address		Address	800 BRICKELL AVENUE, 4TH FLOOR, SUITE 408
	City-State-Zip:	MIAMI FL 33131	City-State-Zip:	MIAMI FL 33131
	Title	MANAGER SOLCAP, LTD 800 BRICKELL AVENUE, 4TH FLOOR, SUITE 408	Title	MANAGER
			Name	MOSQUERA BENATUIL, CARLOS
	Name		Address	800 BRICKELL AVENUE
	Address			4TH FLOOR SUITE 408
	City-State-Zip:	MIAMI FL 33131	City-State-Zip:	MIAMI FL 33131

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: JUAN CARLOS MOSQUERA BENATUIL

MANAGER

#### 05/03/2024

Date

Electronic Signature of Signing Authorized Person(s) Detail

## FILED May 03, 2024 Secretary of State 5970078969CC

Certificate of Status Desired: No

Date