## **2025 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M22000005836

Entity Name: POSIGEN OWNER, LLC

**Current Principal Place of Business:** 

145 JAMES DR E, STE 300 ST. ROSE, LA 70087

**Current Mailing Address:** 

145 JAMES DR E, STE 300 ST. ROSE, LA 70087 US

FEI Number: 83-1663580 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CAPITOL CORPORATE SERVICES, INC. 515 EAST PARK AVENUE 2ND FL TALLAHASSEE, FL 32301 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

FILED Apr 30, 2025

**Secretary of State** 

9605658343CC

## Authorized Person(s) Detail:

Title MEMBER

Name POSIGEN BACKLEVERAGE, LLC
Address 145 JAMES DR E, STE 300

City-State-Zip: ST. ROSE LA 70087

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: POSIGEN BACKLEVERAGE, LLC

MEMBER MANAGER

04/30/2025