2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 04, 2025
Secretary of State
1236333606CC

DOCUMENT# L14000014133

Entity Name: SLASH LLC

Current Principal Place of Business:

VIA FOCILIDE, 5
ROMA, RM 00125

Current Mailing Address:

VIA FOCILIDE, 5
ROMA, RM 00125 IT

FEI Number: 47-1996821

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

IBS GROUP LLC
320 S FLAMINGO RD # 271
PEMBROKE PINES, FL 33027 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	MM	Title	MM
Name	BARRA, RICCARDO	Name	PANDOLFI, CRISTINA
Address	VIA FOCILIDE, 5	Address	VIA FOCILIDE 5
City-State-Zip:	ROMA RM 00125	City-State-Zip:	ROMA RM 00125

Title	MM
Name	BARRA, FEDERICO
Address	VIA FOCILIDE 5
City-State-Zip:	ROMA RM 00125

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: RICCARDO BARRA MR 04/04/2025

Electronic Signature of Signing Authorized Person(s) Detail — Date