

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000126853

**Entity Name:** IMPLAGRAFT, LLC

**Current Principal Place of Business:**

12701 MAGNOLIA BAY BLVD.  
CLERMONT, FL 34711-8144

**Current Mailing Address:**

POST OFFICE BOX 560569  
MONTVERDE, FL 34756-0569 UN

**FEI Number:** 81-3233259

**Certificate of Status Desired:** Yes

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

RODRIGUEZ, LUIS  
12701 MAGNOLIA BAY BOULEVARD  
CLERMONT, FL 34711-8144 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  
Name RODRIGUEZ, LUIS  
Address 12701 MAGNOLIA BAY BLVD.  
City-State-Zip: CLERMONT FL 34711

Title AMBR  
Name RODRIGUEZ, MAYRA J  
Address 12701 MAGNOLIA BAY BLVD.  
City-State-Zip: CLERMONT FL 34711

*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:** LUIS RODRIGUEZ

**GENERAL MANAGER**

**01/24/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date