

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000137632

**Entity Name:** ANDRIX USA LLC.

**Current Principal Place of Business:**

1443 WASHINGTON AVENUE  
MIAMI BEACH, FL 33139

**Current Mailing Address:**

1443 WASHINGTON AVENUE  
MIAMI BEACH, FL 33139 US

**FEI Number:** 61-1798870

**Certificate of Status Desired:** No

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

VISCOMI, SALVATORE  
2301 COLLINS AVENUE  
APT 341  
MIAMI BEACH, FL 33139 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:** SALVATORE VISCOMI

04/17/2018

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGRM	Title	MGR
Name	VISCOMI, SALVATORE	Name	BRUNO, VALERIO
Address	1443 WASHINGTON AVENUE	Address	1410 EUCLID AVENUE
City-State-Zip:	MIAMI BEACH FL 33139	City-State-Zip:	MIAMI BEACH FL 33139

*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:** SALVATORE VISCOMI

MGRM

04/17/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date