

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L18000155201

**Entity Name:** ERIVAN BIO, LLC

**Current Principal Place of Business:**

12085 RESEARCH DRIVE  
LAB 180  
ALACHUA, FL 32615

**Current Mailing Address:**

12085 RESEARCH DRIVE  
BOX 45  
ALACHUA, FL 32615 US

**FEI Number:** 83-1006972

**Certificate of Status Desired:** Yes

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

GRAYROBINSON, PA  
12085 RESEARCH DRIVE  
LAB 180  
ALACHUA, FL 32615 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            CEO  
Name            NASSIRI KOOPAEI, NASSER  
Address        12085 RESEARCH DRIVE  
                  BOX 45  
City-State-Zip: ALACHUA FL 32615

Title            AUTHORIZED MEMBER  
Name            COOK, DARIN R  
Address        12085 RESEARCH DRIVE  
                  BOX 45  
City-State-Zip: ALACHUA FL 32615

Title            AUTHORIZED MEMBER  
Name            MCGILL, GARY  
Address        12085 RESEARCH DRIVE  
                  BOX 45  
City-State-Zip: ALACHUA FL 32615

*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:** NASSER NASSIRI KOOPAEI

CEO

01/18/2024

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date