

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000237247

**Entity Name:** RAREGENEX, LLC

**Current Principal Place of Business:**

5930 SW 9TH TER.  
WEST MIAMI, FL 33144

**Current Mailing Address:**

5930 SW 9TH TER.  
WEST MIAMI, FL 33144

**FEI Number:** 87-0937405

**Certificate of Status Desired:** No

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

MEDINA, WILLIAM  
5930 SW 9TH TER.  
WEST MIAMI, FL 33144 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 FOUNDER, CEO  
Name MEDINA, WILLIAM  
Address 5930 SW 9TH TER.  
City-State-Zip: WEST MIAMI FL 33144

Title CO-FOUNDER, MANAGER  
Name NAYA, RICK  
Address 5930 SW 9TH TER.  
City-State-Zip: WEST MIAMI FL 33144

Title MANAGER  
Name WELLS, JEFF  
Address 5930 SW 9TH TER.  
City-State-Zip: WEST MIAMI FL 33144

Title MANAGER  
Name JONES, KRYSTA  
Address 5930 SW 9TH TER.  
City-State-Zip: WEST MIAMI FL 33144

Title MANAGER  
Name BUQUET, CHARLIE J. III  
Address 5930 SW 9TH TER.  
City-State-Zip: WEST MIAMI FL 33144

*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:** WILLIAM MEDINA

CEO

03/14/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date