

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000510217

Entity Name: RENOWN PHARMACEUTICALS LLC

Current Principal Place of Business:

400 SW 1ST AVE
#2210
FORT LAUDERDALE, FL 33301

Current Mailing Address:

PO BOX 460573
FORT LAUDERDALE, FL 33346 US

FEI Number: 87-4326313

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TRIAN, STAVROS
400 SW 1ST AVE
APT 2210
FORT LAUDERDALE, FL 33301 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 MANAGER
Name GOLDEN DEVELOPING SOLUTIONS
INC
Address PO BOX 460573
City-State-Zip: FORT LAUDERDALE FL 33346

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: STAVROS TRIANT

CEO

07/28/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date