

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000559974

Entity Name: ALLISON PHARMACEUTICS LLC

Current Principal Place of Business:

8091 SHAFFER PKWY
LITTLETON, CO 80127

Current Mailing Address:

8091 SHAFFER PKWY
LITTLETON, CO 80127 US

FEI Number: 83-1095910

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FERRIN, TROY J
8551 WESTSIDE INDUSTRIAL DR
SUITE 1
JACKSONVILLE, FL 32219 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	MGR	Title	MGR
Name	FERRIN, LANCE F	Name	FERRIN, TROY J
Address	8091 SHAFFER PKWY	Address	8091 SHAFFER PKWY
City-State-Zip:	LITTLETON CO 80127	City-State-Zip:	LITTLETON CO 80127

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: TROY J. FERRIN

MEMBER

02/09/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date