

**2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M1400008201

**Entity Name:** AX FOR PHARMA S.R.L.,LLC

**Current Principal Place of Business:**

1721 ALLENS LANE  
SUITE 210  
WILMINGTON, NC 28403

**Current Mailing Address:**

1721 ALLENS LANE  
SUITE 210  
WILMINGTON, NC 28403 US

**FEI Number:** 98-1168741

**Certificate of Status Desired:** No

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

BLUMBERGEXCELSIOR CORPORATE SERVICES, INC.  
155 OFFICE PLAZA DRIVE, 1ST FLOOR  
TALLAHASSEE, FL 32301 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 MGRM  
Name RUOSI, ANDREA  
Address 42 GULF BLVD  
APT 10  
City-State-Zip: INDIAN ROCKS BEACH FL 33785

*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:** ANDREA RUOSI

MGRM

02/21/2018

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

\_\_\_\_\_ Date