

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000014435

Entity Name: PASTA PHARMA LLC

Current Principal Place of Business:

223 PERUVIAN AVE
PALM BEACH, FL 33480

Current Mailing Address:

223 PERUVIAN AVE
PALM BEACH, FL 33480

FEI Number: 92-2220799

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 AMBR
Name PIZZA, JOSEPH M
Address 50 MIDDLE RD
City-State-Zip: PALM BEACH FL 33480

Title AMBR
Name MANNINO, RONALD J
Address 564 MILLER CT
City-State-Zip: WYCKOFF NJ 07481

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: PIZZA JOSEPH M

AMBR

02/09/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date