## 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 general partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered. 01/23/2023

SIGNATURE: WENDY GARCIA

Electronic Signature of Signing General Partner Detail

# MIAMI BEACH. FL 33140 FEI Number: 46-1449563

**Current Principal Place of Business:** 

DOCUMENT# A1200000740

## Name and Address of Current Registered Agent:

GARCIA, WENDY 1370 CORAL WAY MIAMI, FL 33145 US

6135 LA GORCE DRIVE MIAMI BEACH. FL 33140

**Current Mailing Address:** 6135 LA GORCE DRIVE

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: WENDY GARCIA

Electronic Signature of Registered Agent

## **General Partner Detail :**

Document #	
Name	ELDA GARICA, TRUSTEE
Address	6135 LA GORCE DRIVE
City-State-Zip:	MIAMI BEACH FL 33140

Entity Name: ARIS FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP

## FILED Jan 23, 2023 Secretary of State 8919579202CC

Certificate of Status Desired: No

01/23/2023

Date

Date

REGISTERED AGENT