2023 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L01000020151

Entity Name: ARA-AVENTURA LLC

Current Principal Place of Business:

500 CUMMINGS CENTER **SUITE 6550**

BEVERLY, MA 01915

Current Mailing Address:

920 WINTER STREET WALTHAM, MA 02451 US

FEI Number: 06-1635994 Certificate of Status Desired: No

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: STEPHEN RULLIS, VP 01/20/2023

Electronic Signature of Registered Agent

Authorized Person(s) Detail:

City-State-Zip:

BEVERLY MA 01915

Title **MEMBER** Title **MANAGER**

Name PENA, CARLOS F. M.D. Name KAMAL, SYED T.

Address 500 CUMMINGS CENTER Address 500 CUMMINGS CENTER **SUITE 6550**

SUITE 6550

City-State-Zip: BEVERLY MA 01915

Title **MANAGER** Title **MANAGER**

GOLDSAND, CARL S. M.D. Name PENA, CARLOS F. M.D. Name

Address 500 CUMMINGS CENTER Address 500 CUMMINGS CENTER **SUITE 6550**

SUITE 6550

BEVERLY MA 01915 BEVERLY MA 01915 City-State-Zip: City-State-Zip:

Title **MANAGER** Title **MANAGER**

MENDEZ, NICK ATTMORE, GEORGE Name Name

Address **500 CUMMINGS CENTER** Address **500 CUMMINGS CENTER**

> **SUITE 6550 SUITE 6550**

City-State-Zip: BEVERLY MA 01915 City-State-Zip: BEVERLY MA 01915

Title **MEMBER** Title **MEMBER**

AMERICAN RENAL ASSOCIATES LLC Name Name GOLDSAND, CARL S. M.D.

Address 500 CUMMINGS CENTER Address 500 CUMMINGS CENTER

> **SUITE 6550 SUITE 6550**

BEVERLY MA 01915 BEVERLY MA 01915 City-State-Zip: City-State-Zip:

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.

01/20/2023 AST. TREASURER SIGNATURE: MOLLIE MILLER

Electronic Signature of Signing Authorized Person(s) Detail

Date

FILED Jan 20, 2023

Secretary of State

7959793695CR

Date