

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000027490

**Entity Name:** ARRIVA MEDICAL, LLC**Current Principal Place of Business:**100 ABBOTT PARK ROAD  
ABBOTT PARK, IL 60064**Current Mailing Address:**9975 SUMMERS RIDGE ROAD  
SAN DIEGO, CA 92121 US**FEI Number:** 26-2193963**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CT 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 SOLE MANAGER  
Name YOOR, BRIAN  
Address 100 ABBOTT PARK RD  
City-State-Zip: ABBOTT PARK IL 60064

Title PRESIDENT  
Name BRACKEN, SHARON  
Address 100 ABBOTT PARK ROAD  
City-State-Zip: ABBOTT PARK IL 60064

Title VICE PRESIDENT  
Name TAZALLA, GREGORY  
Address 100 ABBOTT PARK ROAD  
City-State-Zip: ABBOTT PARK IL 60064

Title TREASURER  
Name PETERSON, KAREN  
Address 100 ABBOTT PARK ROAD  
City-State-Zip: ABBOTT PARK IL 60064

Title SECRETARY  
Name BERRY, JOHN  
Address 100 ABBOTT PARK ROAD  
City-State-Zip: ABBOTT PARK IL 60064

Title ASSISTANT SECRETARY  
Name KAESEBIER, TARA  
Address 100 ABBOTT PARK ROAD  
City-State-Zip: ABBOTT PARK IL 60064

Title ASSISTANT TREASURER  
Name OOSTERBAAN, BENJAMIN  
Address 100 ABBOTT PARK ROAD  
City-State-Zip: ABBOTT PARK IL 60064

Title ASSISTANT SECRETARY  
Name YASGER, PAUL  
Address 100 ABBOTT PARK ROAD  
City-State-Zip: ABBOTT PARK IL 60064

*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:** TARA KAESEBIER**ASSISTANT SECRETARY** 05/09/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date