

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000008905

**Entity Name:** ARMINDS LLC

**Current Principal Place of Business:**

8345 NW 66 STREET, #A4226  
MIAMI, FL 33166

**Current Mailing Address:**

8345 NW 66 STREET, #A4226  
MIAMI, FL 33166

**FEI Number:** 45-4783397

**Certificate of Status Desired:** No

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

REGISTERED AGENTS INC.  
7901 4TH STREET NORTH  
SUITE 300  
ST.PETERSBURG, FL 33702 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:** BILL HAVRE

01/02/2020

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title           MANAGER  
Name           ALAREF, INC.  
Address        30 N GOULD ST STE R  
City-State-Zip: SHERIDAN WY 82801

*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:** SHADY ALAREF BELLAH

**AUTHORIZED  
REPRESENTATIVE**

01/02/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date