

2017 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.
3030 N ROCKY POINT SE STE 150A
TAMPA, FL 33607 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 CEO
Name SHADY AL AREF BELLAH MOHAMED
Address 8345 NW 66 STREET, #A4226
City-State-Zip: MIAMI FL 33166

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 AL AREF BELLAH

CEO

03/16/2017

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date