

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000034469

Entity Name: ARLEN 1622 LLC

Current Principal Place of Business:

3842 NE 199 TERRACE
AVENTURA, FL 33180

Current Mailing Address:

9801 COLLINS AVENUE
14Q
BAL HARBOUR, FL 33154 US

FEI Number: 45-4788565

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BLECKER, STEVEN CPA
5300 WEST HILLSBORO BOULEVARD
104
COCONUT CREEK, FL 33073 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 MGRM
Name DORNBUSCH, KAREN
Address 3842 NE 199 TERRACE
City-State-Zip: AVENTURA FL 33180

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: KAREN DORNBUSCH

MGM

02/26/2017

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date