

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000080212

**Entity Name:** ARENA MEDICAL GROUP, LLC

**Current Principal Place of Business:**

1 WEST SAMPLE ROAD  
#207  
DEERFIELD BEACH, FL 33064

**Current Mailing Address:**

1 WEST SAMPLE ROAD  
#207  
DEERFIELD BEACH, FL 33064 US

**FEI Number:** 46-2913563

**Certificate of Status Desired:** No

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

ARENA, JOSEPH JOHN MD  
1 WEST SAMPLE ROAD  
#207  
DEERFIELD BEACH, FL 33064 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           MANAGER  
Name           ARENA, JOSEPH J  
Address        4421 NE 30TH AVENUE  
City-State-Zip: LIGHTHOUSE POINT FL 33064

*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:** JOSEPH JOHN ARENA, M.D.

**MANAGER**

**01/18/2018**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date