

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000087770

**Entity Name:** AR SOLUCIONES LLC

**Current Principal Place of Business:**

5119 SW 155 AVE  
MIRAMAR , FL 33027

**Current Mailing Address:**

5119 SW 155 AVE  
MIRAMAR, FL 33027 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

SERNA, CLAUDIA  
20900 NE 30 AVE SUITE  
SUITE 418  
AVENTURA, FL 33180 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	Title	MGRM
Name	ROSILLO, ALEJANDRO	Name	SANTELIZ SOTO, ANA G
Address	5119 SW 155 AVE	Address	5119 SW 155 AVE
City-State-Zip:	MIRAMAR FL 33027	City-State-Zip:	MIRAMAR FL 33027

*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:** ALEJANDRO ROSILLO

**DIRECTOR**

**01/16/2018**

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

\_\_\_\_\_  
Date