

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000164815

Entity Name: ARAP ENTERPRISES LLC

Current Principal Place of Business:

229 MILAM ST. #41
SHREVEPORT, LA 71101

Current Mailing Address:

P O BOX 544
SHREVEPORT, LA 71162 US

FEI Number: 46-4262425

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

WINIKOFF, ANDREW
902 CLINT MOORE RD
132
BOCA RATON, FL 33487 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 VAN CLEAVE, PAUL
Address P O BOX 544
City-State-Zip: SHREVEPORT LA 71162

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: PAUL VAN CLEAVE

PRESIDENT/CEO

04/15/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date