

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L14000141532

**Entity Name:** 555 ARVIDA LLC

**Current Principal Place of Business:**

555 ARVIDA PARKWAY  
CORAL GABLES, FL 33156

**Current Mailing Address:**

555 ARVIDA PARKWAY  
CORAL GABLES, FL 33156 US

**FEI Number:** 47-1801169

**Certificate of Status Desired:** No

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

UNITED STATES REGISTERED AGENTS, INC.  
420 S. DIXIE HIGHWAY  
SUITE 4B  
CORAL GABLES, FL 33146 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            AMBR  
Name            MEDINA, MANUEL D  
Address        555 ARVIDA PARKWAY  
City-State-Zip: CORAL GABLES FL 33156

*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:** MANUEL MEDINA

MEMBER

02/22/2015

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

\_\_\_\_\_ Date