

**2023 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L15000091498

**Entity Name:** AR & SALMAN LLC**Current Principal Place of Business:**265 N WELLS ST  
PANAMA CITY BEACH, FL 32413**Current Mailing Address:**265 N WELLS ST  
PANAMA CITY BEACH, FL 32413 US**FEI Number:** 47-4112638**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ALIYEV, RAMIZ  
265 N WELLS ST  
PANAMA CITY BEACH, FL 32413 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:** RAMIZ ALIYEV

05/20/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	DIRECTOR
Name	ALIYEV, RAMIZ
Address	265 N WELLS ST
City-State-Zip:	PANAMA CITY BEACH FL 32413

Title	CUSTOMER ADVISOR
Name	BILA, ANNA
Address	265 N WELLS ST
City-State-Zip:	PANAMA CITY BEACH FL 32413

Title	AUTHORIZED MEMBER
Name	IBRAGIMOV, KHUSNIDDIN
Address	600 PARKSIDE CIR 625
City-State-Zip:	PANAMA CITY BCH FL 32413

Title	AUTHORIZED MEMBER
Name	KUZNETSOV, VASILY
Address	2425 CAUSEWAY MANOR CT
City-State-Zip:	PANAMA CITY BEACH FL 32408

*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:** RAMIZ ALIYEV**DIRECTOR**

05/20/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date