

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000190932

Entity Name: ARIETE RESTAURANT, LLC.**Current Principal Place of Business:**3540 MAIN HIGHWAY
C-103
COCONUT GROVE, FL 33133**Current Mailing Address:**3540 MAIN HIGHWAY
C-103
COCONUT GROVE, FL 33133**FEI Number:** 47-5568433**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**ODIO, JASON A
185 SW 7TH ST. #703
MIAMI, FL 33130 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	MGR
Name	ODIO, JASON A
Address	185 SW 7TH ST. #703
City-State-Zip:	MIAMI FL 33130

Title	MGR
Name	BELTRAN, MICHAEL
Address	1720 SW 13TH ST.
City-State-Zip:	MIAMI FL 33145

Title	AMBR
Name	FALSETTO, ANDREW
Address	1717 N. BAYSHORE DR. #102
City-State-Zip:	MIAMI FL 33132

Title	AMBR
Name	FALSETTO, MICHAEL
Address	1717 N. BAYSHORE DR. #102
City-State-Zip:	MIAMI FL 33132

Title	MANAGER
Name	BELTRAN, MICHAEL C
Address	3540 MAIN HIGHWAY C-103
City-State-Zip:	COCONUT GROVE FL 33133

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: JASON ODIO**MANAGER****01/13/2016**

Electronic Signature of Signing Authorized Person(s) Detail

Date