**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**
**Feb 26, 2018**
**Secretary of State**
**CC8704539602**

DOCUMENT# L16000032026

**Entity Name:** ARMON 26 LLC

**Current Principal Place of Business:**

100 BAYVIEW DR
418
SUNNY ISLES BEACH, FL 33160

**Current Mailing Address:**

100 BAYVIEW DR
418
SUNNY ISLES BEACH, FL 33160 US

**FEI Number: 81-1555553**

**Certificate of Status Desired:** No

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

VIVAS AGAY, FREDDY J
100 BAYVIEW DR
418
SUNNY ISLES BEACH, FL 33160 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 | Title | MGR |
| Name | VIVAS, BENJAMIN | Name | VIVAS, NEOMI |
| Address | 100 BAYVIEW DR #418 | Address | 100 BAYVIEW DR #418 |
| City-State-Zip: | SUNNY ISLES BEACH FL 33160 | City-State-Zip: | SUNNY ISLES BEACH FL 33160 |

| | |
|---|---|
| Title | MGR |
| Name | AGAY, FREDDY J VIVAS |
| Address | 100 BAYVIEW DR<br>418 |
| City-State-Zip: | SUNNY ISLES BEACH FL 33160 |

*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: FREDDY J VIVAS AGAY — 02/26/2018

Electronic Signature of Signing Authorized Person(s) Detail — Date