

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000014664

Entity Name: ARIA FIVE 17, LLC

Current Principal Place of Business:

2600 S. DOUGLAS RD, STE 1000
CORAL GABLES, FL 33134

Current Mailing Address:

2600 S. DOUGLAS RD, STE 1000
CORAL GABLES, FL 33134 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DOUGLAS REGISTERED AGENTS, LLC
2600 S. DOUGLAS RD, STE 1000
CORAL GABLES, FL 33134 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 NIRANJAN, ARNOLD S
Address 2600 S. DOUGLAS RD, STE 1000
City-State-Zip: CORAL GABLES FL 33134

Title MGR
Name TOPHA- NIRANJAN, GALE
Address 2600 S. DOUGLAS RD, STE 1000
City-State-Zip: CORAL GABLES FL 33134

Title MGR
Name TOPHA-NIRANJAN, KRISTIAN A
Address 2600 S. DOUGLAS RD, STE 1000
City-State-Zip: CORAL GABLES FL 33134

Title MGR
Name NIRANJAN, KEVON
Address 2600 S. DOUGLAS RD, STE 1000
City-State-Zip: CORAL GABLES FL 33134

Title MGR
Name NIRANJAN, KELCEY
Address 2600 S. DOUGLAS RD, STE 1000
City-State-Zip: CORAL GABLES FL 33134

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: NIRANJAN , ARNOLD S

MGR

04/25/2023

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date