

2022 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

DOCUMENT# L19000107622

Entity Name: ARES REAL ESTATE SERVICES, LLC

Current Principal Place of Business:

5950 NW 1ST PLACE, SUITE 165
GAINESVILLE, FL 32607

Current Mailing Address:

5401 N. CENTRAL EXPY., STE. 300
DALLAS, TX 75205 US

FEI Number: 83-4565866

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: LISA DUBOIS, ASST. SECRETARY

02/08/2022

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGER
Name MANNINA, SAMIE LYNNE
Address 245 RIVERSIDE AVENUE
SUITE 300
City-State-Zip: JACKSONVILLE FL 32202

Title MANAGER
Name SURFACE, DAVID K
Address 245 RIVERSIDE AVENUE
SUITE 300
City-State-Zip: JACKSONVILLE FL 32202

Title MANAGER
Name CARONA, JOHN J
Address 5401 N. CENTRAL EXPY., STE. 300
City-State-Zip: DALLAS TX 75205

Title MANAGER
Name CARONA, HELEN E
Address 5401 N. CENTRAL EXPY., STE. 300
City-State-Zip: DALLAS TX 75205

Title SECRETARY
Name KRUPPA, BRIAN
Address 5401 N. CENTRAL EXPY., STE. 300
City-State-Zip: DALLAS TX 75205

Title TREASURER
Name MALDONADO, JOSE B
Address 5401 N. CENTRAL EXPY., STE. 300
City-State-Zip: DALLAS TX 75205

Title MANAGER
Name VEGA, JUAN ALBERTO
Address 5950 NW 1ST PLACE
SUITE 165
City-State-Zip: GAINESVILLE FL 32607

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: BRIAN KRUPPA

SECRETARY

02/08/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date