

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000232185

**Entity Name:** RLA ISLAND LLC

**Current Principal Place of Business:**

3618 FOWLER STREET  
SUITE D  
FORT MYERS, FL 33901

**Current Mailing Address:**

3618 FOWLER STREET  
SUITE D  
FORT MYERS, FL 33901 US

**FEI Number:** 85-2980800

**Certificate of Status Desired:** No

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

JOHN B GALLAGHER PA  
3618 FOWLER STREET  
SUITE D  
FORT MYERS, FL 33901 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           MANAGER  
Name           ARENAS, RICARDO L  
Address        3618 FOWLER STREET  
                  SUITE D  
City-State-Zip: FORT MYERS FL 33901

Title           MANAGER  
Name           BLANKE, JOHN  
Address        3618 FOWLER STREET  
                  SUITE D  
City-State-Zip: FORT MYERS FL 33901

Title           PRESIDENT  
Name           GALLAGHER, JOHN B  
Address        3618 FOWLER STREET  
                  SUITE D  
City-State-Zip: FORT MYERS FL 33901

*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:** JOHN B GALLAGHER

**PRESIDENT**

**02/07/2024**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date