

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L23000162646

**Entity Name:** ARGB VENTURES LLC

**Current Principal Place of Business:**

15912 NORTHLAKE VILLAGE DR  
ODESSA, FL 33556

**Current Mailing Address:**

15912 NORTHLAKE VILLAGE DR  
ODESSA, FL 33556 UN

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

BARLOW, GRANT  
15912 NORTHLAKE VILLAGE DR  
ODESSA, FL 33556 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	BARLOW, GRANT	Name	RAGAB, ASHRAF MD
Address	15912 NORTHLAKE VILLAGE DR	Address	604 LIME AVENUE
City-State-Zip:	ODESSA FL 33556	City-State-Zip:	CLEARWATER FL 33756

*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:** GRANT BARLOW

**MGR**

**03/12/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date