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: JEFF SIMON MGR

Electronic Signature of Signing Authorized Person(s) Detail

## SIGNATURE:

Electronic Signature of Registered Agent

## Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	SIMON, JEFF	Name	SIMON, SARAH
Address	12358 SW FORLI WAY	Address	12358 SW FORLI WAY
City-State-Zip:	PORT SAINT LUCIE FL 34987	City-State-Zip:	PORT SAINT LUCIE FL 34987

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.

## FEI Number: 93-2513829

## Name and Address of Current Registered Agent:

SIMON, JEFF 12358 SW FORLI WAY PORT SAINT LUCIE, FL 34987 US

# 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L23000343100

Entity Name: ARI VIRTUAL VENTURES LLC

## **Current Principal Place of Business:**

12358 SW FORLI WAY PORT SAINT LUCIE. FL 34987

## **Current Mailing Address:**

12358 SW FORLI WAY PORT SAINT LUCIE. FL 34987 US

Certificate of Status Desired: No

05/01/2024

FILED May 01, 2024 Secretary of State 3688543053CC

Date