


2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 16, 2007 8:00 am
Secretary of State

04-16-2007 90340 012 ****50.00

DOCUMENT # L06000081172	
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1. Entity Name
ARCH, LLC

Principal Place of Business
185 SE 14 TERRACE #2003
MIAMI, FL 33131

Mailing Address
185 SE 14 TERRACE #2003
MIAMI, FL 33131

2. Principal Place of Business - No P.O. Box #

14160 Palmetto Frontage Rd

Suite, Apt. #, etc.

21

City & State

Miami Lakes, FL

Zip

33016

Country

USA

3. Mailing Address

14160 Palmetto Frontage Rd.

Suite, Apt. #, etc.

21

City & State

Miami Lakes, FL

Zip

33016

Country

USA

04112007 Chg-LLC CR2E083 (12/06)

4. FEI Number

20-5403099

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

6. Name and Address of Current Registered Agent

RUIZ, ALEXANDER
185 SE 14 TERRACE #2003
MIAMI, FL 33131

7. Name and Address of New Registered Agent

Name

A Ruiz, Alexander

Street Address (P.O. Box Number is Not Acceptable)

14160 Palmetto Frontage Rd

Suite 21

City

Miami Lakes

FL

Zip Code

33016

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent, and title if applicable

(NOTE: Registered Agent signature required when reinstating)

04/11/07

DATE

Filing Fee is \$50.00
Due by May 1, 2007

Make check payable to
Florida Department of State

9. MANAGING MEMBERS/MANAGERS

TITLE	MGRM	<input type="checkbox"/> Delete
NAME	RUIZ, ALEXANDER	
STREET ADDRESS	185 SE 14 TERRACE #2003	
CITY-ST-ZIP	MIAMI, FL 33131	

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

10. ADDITIONS/CHANGES

TITLE	MGRM	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Ruiz, Alexander	
STREET ADDRESS	14160 Palmetto Frontage Rd, Suite 21	
CITY-ST-ZIP	Miami Lakes, FL 33016	

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my 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 608, Florida Statutes.

SIGNATURE:  Alexander Ruiz 04/11/07 305-281-4115

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

Date

Daytime Phone #