

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000070820

**FILED**  
**Apr 15, 2009**  
**Secretary of State**

**Entity Name:** ARP HIGH PERFORMANCE LLC

**Current Principal Place of Business:**

4850 NW 108 PASSAGE  
DORAL, FL 33178

**New Principal Place of Business:**

9217 SW 227 ST,  
27  
CUTLER BAY, FL 33190

**Current Mailing Address:**

4850 NW 108 PASSAGE  
DORAL, FL 33178

**New Mailing Address:**

9217 SW 227 ST,  
27  
CUTLER BAY, FL 33190

FEI Number: 26-3080479

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

RODRIGUEZ, ARCADIO  
4850 NW 108 PASSAGE  
DORAL, FL 33178 US

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

RODRIGUEZ, ARCADIO  
9217 SW 227 ST,  
27  
CUTLER BAY, FL 33190 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: \_\_\_\_\_

04/15/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: RODRIGUEZ, ARCADIO  
Address: 4850 NW 108 PASSAGE  
City-St-Zip: DORAL, FL 33178

**ADDITIONS/CHANGES:**

Title: MGR (X) Change ( ) Addition  
Name: RODRIGUEZ, ARCADIO  
Address: 9217 SW 227 ST, UNIT 27  
City-St-Zip: CUTLER BAY, FL 33190

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: ARCADIO RODRIGUEZ

MGR

04/15/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date