

**LIMITED LIABILITY COMPANY
UNIFORM BUSINESS REPORT (UBR)**

FILED
May 12, 2002 8:00 am
Secretary of State

05-12-2002 90577 038 ****50.00

DOCUMENT # L 99000003949

1. Entity Name

ARYA DEVELOPMENT, LLC

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857263

2. Principal Place of Business

318 N. Prescott Ave

3. Mailing Address

2710 DREW STR

Suite, Apt. #, etc.

Suite, Apt. #, etc.

200

City & State

Clearwater

City & State

CLEARWATER

4. FEI Number

59-3584570

Applied For

Not Applicable

Zip

Country

Zip

Country

33755

FL

33705

FL

5. Certificate of Status Desired ☐

\$5.00 Additional
Fee Required

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IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Karen Kaplan

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

2453 Brasilia Dr. # 39

City

CLEARWATER

FL

Zip Code

33763

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.

SIGNATURE

Karen Kaplan

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

4/30/02

DATE

FEE IS \$50.00

Make Check Payable to Department of State

DUE BY MAY 1

9. MANAGING MEMBERS/MANAGERS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

MGR
JOSEPH CHARNY

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

Joseph Charny JOSEPH CHARNY 4.29.02 (727)445-9316

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

Date

Daytime Phone #