

**2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P19000034218

**Entity Name:** M/Y ARIENCE, INC.

**Current Principal Place of Business:**

201 BEACHSIDE DRIVE  
VERO BEACH, FL 32963

**FILED**  
**Jun 02, 2020**  
**Secretary of State**  
**0624479437CC**

**Current Mailing Address:**

C/O APG LLC  
ONE SOUTH STREET, SUITE 2550  
BALTIMORE, MD 21202 US

**FEI Number:** 83-4572118

**Certificate of Status Desired:** No

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

CORPORATE CREATIONS NETWORK INC.  
801 US HIGHWAY 1  
NORTH PALM BEACH, FL 33408 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

**Officer/Director Detail :**

Title DP, PRESIDENT  
Name MILLER, WILLIAM H III  
Address C/O APG LLC  
ONE SOUTH STREET, SUITE 2550  
City-State-Zip: BALTIMORE MD 21202

Title VP, TREASURER  
Name STEWART, MAUREEN L  
Address C/O APG LLC  
ONE SOUTH STREET, SUITE 2550  
City-State-Zip: BALTIMORE MD 21202

Title ASST. TREASURER, ASST.  
SECRETARY  
Name COBERT, JULIE M  
Address C/O APG LLC  
ONE SOUTH STREET, SUITE 2550  
City-State-Zip: BALTIMORE MD 21202

*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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** MAUREEN L. STEWART

**VP, TREASURER**

**06/02/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date