## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000042835

Entity Name: ARPA LLC

**Current Principal Place of Business:** 

1150 LEE BLVD

LEHIGH ACRES, FL 33936

**Current Mailing Address:** 

1150 LEE BLVD

LEHIGH ACRES, FL 33936 US

FEI Number: 20-0412010 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RODRIGUEZ, ROSAMARY 1150 LEE BLVD

LEHIGH ACRES, FL 33936 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

**FILED** Apr 22, 2015

**Secretary of State** 

CC7745256184

## Authorized Person(s) Detail:

Title MGR

SOLUTION MEDICAL SERVICE, INC. Name

1150 LEE BLVD., STE 4 Address City-State-Zip: LEHIGH ACRES FL 33936

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: PEDRO YLISASTIGUI BY SOLUTION MEDICAL SERVICE, INC

PD

04/22/2015