

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000071621

Entity Name: ARBOR VILLAS, LLC

Current Principal Place of Business:

5200 SW 8TH STREET
200
CORAL GABLES, FL 33134

Current Mailing Address:

PO BOX 141659
CORAL GABLES, FL 33114 US

FEI Number: 20-1667920

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GAVARRETE, FERNANDO
5200 SW 8TH STREET
SUITE 200
CORAL GABLES, FL 33134 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

Authorized Person(s) Detail :

Title MGRM
Name GAVARRETE, FERNANDO
Address 5200 SW 8TH STREET
200
City-State-Zip: CORAL GABLES FL 33134

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: FERNANDO GAVARRETE

MGR

04/11/2018

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date