

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L06000057792

**Entity Name:** ARROWFISH, LLC

**Current Principal Place of Business:**

4400 BAYOU BOULEVARD  
SUITE 31B  
PENSACOLA, FL 32503

**Current Mailing Address:**

420 KENILWORTH AVE  
GULF BREEZE, FL 32561 US

**FEI Number:** 74-3183835

**Certificate of Status Desired:** No

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

NORRIS, CHARLES K  
420 KENILWORTH AVE  
GULF BREEZE, FL 32561 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 NORRIS, CHARLES K  
Address 420 KENILWORTH AVE.  
City-State-Zip: GULF BREEZE FL 32561

Title MGRM  
Name DEAN, JASON  
Address 4400 BAYOU BOULEVARD, SUITE 31B  
City-State-Zip: PENSACOLA FL 32503

*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:** CHARLES K NORRIS

MGRM

05/01/2018

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date