# 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L10000127612

#### Entity Name: ARIEL LOVERA, LLC

### Current Principal Place of Business:

14895 FELLS LN ORLANDO, FL 32827

# **Current Mailing Address:**

14895 FELLS LN ORLANDO, FL 32827 US

# FEI Number: 45-4361063

### Name and Address of Current Registered Agent:

LOVERA, ARIEL 14895 FELLS LN ORLANDO, FL 32827 US FILED Jan 23, 2017 Secretary of State CC3198138488

Date

Certificate of Status Desired: No

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

# Authorized Person(s) Detail :

Title	PRESIDENT	Title	VP
Name	LOVERA, ARIEL	Name	LOVERA, LUZ V
Address	14895 FELLS LN	Address	3109 HERITAGE PARK WAY
City-State-Zip:	ORLANDO FL 32827	City-State-Zip:	ORLANDO FL 32837
Title	AUTHORIZED MEMBER	Title	AUTHORIZED MEMBER
Title Name	AUTHORIZED MEMBER LOVERA, CORALLYS V	Title Name	AUTHORIZED MEMBER LOVERA, ZACHARY X
Name	LOVERA, CORALLYS V 14895 FELLS LN	Name	LOVERA, ZACHARY X

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: ARIEL LOVERA

PRESIDENT

01/23/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date