

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000071375

**Entity Name:** ARL CHS, LLC

**Current Principal Place of Business:**

505 S FLAGLER DR  
SUITE 1010  
WEST PALM BEACH, FL 33401

**Current Mailing Address:**

505 S FLAGLER DR  
SUITE 1010  
WEST PALM BEACH, FL 33401 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

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

KOENIG, PATRICK C  
505 S FLAGLER DR  
SUITE 1010  
WEST PALM BEACH, FL 33401 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:** PATRICK C KOENIG

01/17/2017

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name LASSITER, ANEICE R  
Address 1 OLD HENDERSONVILLE HWY  
BOX #999  
City-State-Zip: PISGAH FOREST NC 28768

*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:** ANEICE R LASSITER

MANAGING MEMBER

01/17/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date