

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000093576

Entity Name: ARALIA, LLC

Current Principal Place of Business:

54 LOGAN LANE
UNIT C
SANTA ROSA BEACH, FL 32459

Current Mailing Address:

54 LOGAN LANE
UNIT C
SANTA ROSA BEACH, FL 32459

FEI Number: 45-3023385

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CRAWFORD, JOHN R
1200 RIVERPLACE BLVD
SUITE 800
JACKSONVILLE, FL 32207 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 GENERAL MANAGER
Name TRIPOD MANAGEMENT, INC.
Address 54 LOGAN LANE
UNIT C
City-State-Zip: SANTA ROSA BEACH FL 32459

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: TRIPOD MANAGEMENT, INC.

MANAGER

04/30/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date