

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000132737

**Entity Name:** ARBA REALTY, LLC

**Current Principal Place of Business:**

% KRINITZ, KRINITZ & SPERBER, CPA'S  
580 SYLVAN AVENUE, STE. 1C  
ENGLEWOOD CLIFFS, NJ 07632

**Current Mailing Address:**

% KRINITZ, KRINITZ & SPERBER, CPA'S  
580 SYLVAN AVENUE, STE. 1C  
ENGLEWOOD CLIFFS, NJ 07632

**FEI Number:** 46-1253874

**Certificate of Status Desired:** No

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

FLORIDA FILING & SEARCH SERVICES, INC.  
155 OFFICE PLAZA DRIVE, STE. A  
TALLAHASSEE, FL 32301 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 RUSKIN, ADAM  
Address 580 SYLVAN AVENUE, STE. 1C  
City-State-Zip: ENGLEWOOD CLIFFS NJ 07632

Title MGRM  
Name RUSKIN, MAURA  
Address 580 SYLVAN AVENUE, STE. 1C  
City-State-Zip: ENGLEWOOD CLIFFS NJ 07632

*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:** ADAM RUSKIN

**MEMBER**

**01/05/2018**

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

\_\_\_\_\_  
Date