

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000061309

Entity Name: ARREGROUP LLC**Current Principal Place of Business:**11693 W ATLANTIC BLVD
APT. 3
CORAL SPRINGS, FL 33071**Current Mailing Address:**11693 W ATLANTIC BLVD
APT. 3
CORAL SPRINGS, FL 33071 US**FEI Number:** 46-5414015**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MARLES, BETTY C
10777 W. SAMPLE ROAD
APT. 1001
CORAL SPRINGS, FL 33065 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 MGR
Name ARREAZA, ARIADNA L
Address 11693 W ATLANTIC BLVD. APT 3
City-State-Zip: CORAL SPRINGS FL 33071

Title MGR
Name ARREAZA, ROBERTO J
Address 11693 W ATLANTIC BLVD. APT 3
City-State-Zip: CORAL SPRINGS FL 33071

Title MGR
Name ARREAZA, AIXA I
Address 11693 W ATLANTIC BLVD. APT 3
City-State-Zip: CORAL SPRINGS FL 33071

Title MGR
Name ARREAZA, ALEX D
Address 11693 W ATLANTIC BLVD. APT 3
City-State-Zip: CORAL SPRINGS FL 33071

Title MGR
Name MARLES, BETTY C
Address 10777 W. SAMPLE RD. APT. 1001
City-State-Zip: CORAL SPRINGS FL 33065

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: BETTY MARLES

MGR

03/01/2016

Electronic Signature of Signing Authorized Person(s) Detail_____
Date