## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000135833

Entity Name: BRIDGES MEDIATORS, LLC

**Current Principal Place of Business:** 

1454 SE SUNSHINE AVENUE PORT ST. LUCIE. FL 34952

**Current Mailing Address:** 

6 ALLEE DES ERABLES BONSECOURS, 76240 FR

FEI Number: 61-1770220 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BEST OPTIONS LLC 1145 VIA JARDIN WEST PALM BEACH, FL 33418 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

FILED Jan 18, 2019

**Secretary of State** 

6279668864CC

Authorized Person(s) Detail:

Title AMBR Title AMBR

Name ARBID, SYLVIE Name ARBID, THOMAS

Address 6 ALLEE DES ERABLES Address 6 ALLEE DES ERABLES

City-State-Zip: BONSECOURS 76240 City-State-Zip: BONSECOURS 76240

Title AMBR

Name ARBEED, RIAD

Address 6 ALLEE DES ERABLES
City-State-Zip: BONSECOURS 76240

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: THOMAS ARBID AMBR

Electronic Signature of Signing Authorized Person(s) Detail

01/18/2019 Date