# **2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000271283

Entity Name: ARBORVISUM LLC

Sec 93

Jan 31, 2021 Secretary of State 9319447279CC

**FILED** 

# **Current Principal Place of Business:**

3707 SW 1ST ST

CORAL GABLES. FL 33134

### **Current Mailing Address:**

3707 SW 1ST ST

CORAL GABLES. FL 33134 US

FEI Number: 84-3709118 Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

CALVO, SHAVELLI 3707 SW 1ST ST CORAL GABLES, FL 33134 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 AMBR

Name FETTER-SALAZAR, NICOLAS

Address 3707 SW 1ST ST

City-State-Zip: CORAL GABLES FL 33134

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.