

2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M50800

Entity Name: ADP TOTALSOURCE FL XV, INC.**Current Principal Place of Business:**10200 SUNSET DRIVE
MIAMI, FL 33173**Current Mailing Address:**1 ADP BLVD
MS 433
ROSELAND, NJ 07068 US**FEI Number:** 65-0027295**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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**Officer/Director Detail :**

Title	DIRECTOR
Name	TINGLE, JENNIFER
Address	10200 SUNSET DRIVE
City-State-Zip:	MIAMI FL 33173

Title	VP
Name	ORIHUELA, CRISTIAN
Address	5800 WINDWARD PKWY
City-State-Zip:	ALPHARETTA GA 30005

Title	ASSISTANT SECRETARY
Name	SETNOR, NIKKI
Address	10200 SUNSET DRIVE
City-State-Zip:	MIAMI FL 33173

Title	PRESIDENT
Name	QUEVEDO, ALEX
Address	10200 SUNSET DRIVE
City-State-Zip:	MIAMI FL 33173

Title	CFO
Name	DREWRY, JOHN W
Address	10200 SUNSET DRIVE
City-State-Zip:	MIAMI FL 33173

Title	SECRETARY
Name	TINGLE, JENNIFER
Address	10200 SUNSET DR
City-State-Zip:	MIAMI FL 33173

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JENNIFER TINGLE**SECRETARY****04/04/2024**_____
Electronic Signature of Signing Officer/Director Detail_____
Date