

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000017104

Entity Name: ADAR ASSOCIATES, LLC

Current Principal Place of Business:

6865 N LINCOLN AVE
LINCOLNWOOD,, IL 60712

Current Mailing Address:

C/O GINSPARG
3389 SHERIDAN, #195
HOLLYWOOD, FL 33021

FEI Number: 20-0822965

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GINSPARG, NORMAN J
12221 WEST DIXIE HIGHWAY
NORTH MIAMI, FL 33161 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 ESFORMES, PHILIP
Address 6865 N. LINCOLN AVE
City-State-Zip: LINCOLNWOOD IL 60712

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: PHILIP ESFORMES

MGR

03/19/2015

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date