Current Mai	ling Address:			
P.O. BOX 26 GLEN ST. M	ARY, FL 32040 US			
FEI Number: NOT APPLICABLE			Certificate of Status Desired: No	
Name and A	ddress of Current Registered Agent:			
9800 PÁYNE LA				
	ANE	its registered office or regis	tered agent, or both, in the State of Fi	lorida.
9800 PÁYNE LA GLEN ST. MAR The above named	ANE Y, FL 32040 US	its registered office or regis	tered agent, or both, in the State of Fi	<sup>lorida.</sup> 01/19/201
9800 PÁYNE LA GLEN ST. MAR The above named	ANE Y, FL 32040 US I entity submits this statement for the purpose of changing i	its registered office or regis	tered agent, or both, in the State of Fi	
9800 PÁYNE LÁ GLEN ST. MAR The above named SIGNATURE	ANE Y, FL 32040 US d entity submits this statement for the purpose of changing i E: LARRY L PAYNE SR	its registered office or regis	tered agent, or both, in the State of Fi	01/19/201
9800 PÁYNE LÁ GLEN ST. MAR <i>The above named</i> SIGNATURE Authorized	ANE Y, FL 32040 US d entity submits this statement for the purpose of changing i E: LARRY L PAYNE SR Electronic Signature of Registered Agent	its registered office or regis	tered agent, or both, in the State of Fi	01/19/201
9800 PÁYNE LÁ GLEN ST. MAR <i>The above named</i> SIGNATURE <b>Authorized</b> I Title	ANE Y, FL 32040 US d entity submits this statement for the purpose of changing is E: LARRY L PAYNE SR Electronic Signature of Registered Agent Person(s) Detail :			01/19/201
9800 PÁYNE LÁ GLEN ST. MAR The above named SIGNATURE	ANE Y, FL 32040 US d entity submits this statement for the purpose of changing is E: LARRY L PAYNE SR Electronic Signature of Registered Agent Person(s) Detail : P	Title	VP	01/19/201

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: LARRY L, PAYNE

PRESIDENT

01/19/2017

Electronic Signature of Signing Authorized Person(s) Detail

## DOCUMENT# L07000014523

Entity Name: ADEE ENTERPRISES, LLC

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

## **Current Principal Place of Business:**

9800 PAYNE LANE GLEN ST. MARY, FL 32040

## FILED Jan 19, 2017 Secretary of State CC9283479188