

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000120592

Entity Name: DAD LLC**Current Principal Place of Business:**8530 SW 57TH AVE
SOUTH MIAMI, FL 33143**Current Mailing Address:**8530 SW 57TH AVE
SOUTH MIAMI, FL 33143**FEI Number:** APPLIED FOR**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**MANDELSTAM, RODNEY
8530 S.W. 57 AVE.
SOUTH MIAMI,, FL 33143 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	MANDELSTAM, RODNEY
Address	8530 SW 57TH AVE
City-State-Zip:	SOUTH MIAMI FL 33143

Title	VMGR
Name	MANDELSTAM, CAROL
Address	8530 SW 57TH AVE
City-State-Zip:	SOUTH MIAMI FL 33143

Title	T
Name	CAMACHO, DEEN
Address	8530 SW 57TH AVE
City-State-Zip:	SOUTH MIAMI FL 33143

Title	T
Name	MANDELSTAM, DEON
Address	8530 SW 57TH AVE
City-State-Zip:	SOUTH MIAMI FL 33143

Title	T
Name	SOUSA, ALLEN
Address	8530 SW 57TH AVE
City-State-Zip:	SOUTH MIAMI FL 33143

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: RODNEY MANDELSTAM**MNG MEMBER****01/14/2015**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date