

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000011341

**Entity Name:** ADAMUS HT USA LLC

**Current Principal Place of Business:**

1515 SOUTH FEDERAL HWY  
SUITE 213  
BOCA RATON, FL 33432

**Current Mailing Address:**

1515 SOUTH FEDERAL HWY  
SUITE 213  
BOCA RATON, FL 33432 US

**FEI Number:** 27-4674824

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

DAVID M. BECKERMAN, PA  
7000 W PALMETTO PARK ROAD  
SUITE 500  
BOCA RATON, FL 33433 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 ADAMUS HT SP ZOO  
Address ROBOTNICZA 3A  
City-State-Zip: SZCZECIN 71-712

Title MANAGER  
Name JAKUBIAK, ARTUR  
Address 1515 SOUTH FEDERAL HWY  
SUITE 213  
City-State-Zip: BOCA RATON FL 33432

Title AUTHORIZED REPRESENTATIVE  
Name MANKA, IZABELA  
Address 1515 SOUTH FEDERAL HWY  
SUITE 213  
City-State-Zip: BOCA RATON FL 33432

*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:** IZABELA MANKA

**AUTHORIZED  
REPRESENTATIVE**

**02/04/2015**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date