

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000058037

Entity Name: ADELSON SCHECHTER, PLLC

Current Principal Place of Business:

501 GOLDEN ISLES DRIVE
SUITE 203
HALLANDALE BEACH, FL 33009

Current Mailing Address:

501 GOLDEN ISLES DRIVE
SUITE 203
HALLANDALE BEACH, FL 33009 US

FEI Number: 36-4699921

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ANTHONY S. ADELSON, P.A.
501 GOLDEN ISLES DRIVE
SUITE 203
HALLANDALE BEACH, FL 33009 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 MANAGER
Name ANTHONY S. ADELSON, P.A.
Address 501 GOLDEN ISLES DRIVE, SUITE 203
City-State-Zip: HALLANDALE BEACH FL 33009

Title MANAGER
Name JEROME R. SCHECHTER, P.A.
Address 1995 E OAKLAND PARK BLVD, SUITE
 210
City-State-Zip: FORT LAUDERDALE FL 33306

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: ANTHONY S. ADELSON

MANAGER

04/15/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date