

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000065256

**Entity Name:** ADDSAMDEV FAMILY, LLC

**Current Principal Place of Business:**

1200 EAST LAS OLAS BLVD  
SUITE 103  
FORT LAUDERDALE, FL 33301

**Current Mailing Address:**

1200 EAST LAS OLAS BLVD  
SUITE 103  
FORT LAUDERDALE, FL 33301 US

**FEI Number:** 81-2175813

**Certificate of Status Desired:** No

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

MARCUS, JOEL CPA  
676 W. PROSPECT ROAD  
FORT LAUDERDALE, FL 33309 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	MBR	Title	MBR
Name	LOUISE-WEST RUFF, ADDISON	Name	ELMES, SAMANTHA J
Address	1200 EAST LAS OLAS BLVD., SUITE 103	Address	1200 EAST LAS OLAS BLVD., SUITE 103
City-State-Zip:	FORT LAUDERDALE FL 33301	City-State-Zip:	FORT LAUDERDALE FL 33301
Title	MBR	Title	MGR
Name	ELMES, DEVON A	Name	ELMES, TIM
Address	1200 EAST LAS OLAS BLVD., SUITE 103	Address	1200 EAST LAS OLAS BLVD SUITE 103
City-State-Zip:	FORT LAUDERDALE FL 33301	City-State-Zip:	FORT LAUDERDALE FL 33301

*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:** ELMES , TIM

**MGR**

**04/23/2024**

Electronic Signature of Signing Authorized Person(s) Detail

Date