

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000065256

Entity Name: ADDSAMDEV FAMILY, LLC

Current Principal Place of Business:

901 EAST LAS OLAS BLVD
SUITE 101
FORT LAUDERDALE, FL 33301

Current Mailing Address:

901 EAST LAS OLAS BLVD
SUITE 101
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 | MGR | Title | MBR |
| Name | ELMES, TIM | Name | LOUISE-WEST RUFF, ADDISON |
| Address | 901 EAST LAS OLAS BLVD., SUITE 101 | Address | 901 EAST LAS OLAS BLVD., SUITE 101 |
| City-State-Zip: | FORT LAUDERDALE FL 33301 | City-State-Zip: | FORT LAUDERDALE FL 33301 |
| | | | |
| Title | MBR | Title | MBR |
| Name | ELMES, SAMANTHA J | Name | ELMES, DEVON A |
| Address | 901 EAST LAS OLAS BLVD., SUITE 101 | Address | 901 EAST LAS OLAS BLVD., SUITE 101 |
| 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: TIM ELMES

MGR

04/06/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date