

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000222669

**Entity Name:** ADES BEHAVIORAL SERVICES LLC

**Current Principal Place of Business:**

384 NE 35TH AVE  
HOMESTEAD, FL 33033

**Current Mailing Address:**

384 NE 35TH AVE  
HOMESTEAD, FL 33033

**FEI Number:** 84-3032881

**Certificate of Status Desired:** No

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

FLORES, EDITH  
384 NE 35TH AVE  
HOMESTEAD, FL 33033 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            FLORES, EDITH  
Address        384 NE 35TH AVE  
City-State-Zip: HOMESTEAD FL 33033

Title            MANAGER  
Name            ROIG, SERGIO  
Address        384 NE 35TH AVE  
City-State-Zip: HOMESTEAD FL 33033

*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:** SERGIO ROIG

**MANAGER**

**01/30/2022**

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

\_\_\_\_\_  
Date