

**2023 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT**

DOCUMENT# L20000387262

**Entity Name:** AD GENERALS LLC

**Current Principal Place of Business:**

160 S UNIVERSITY DR  
SUITE A  
PLANTATION, FL 33324

**Current Mailing Address:**

160 S UNIVERSITY DRIVE  
SUITE A  
PLANTATION, FL 33324 US

**FEI Number:** 86-1180159

**Certificate of Status Desired:** No

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

COHEN, ARIELLE  
696 NW 38TH AVE  
DEERFIELD BEACH , FL 33442 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 AUTHORIZED MEMBER  
Name CAZADILLA, ELIZABETH  
Address 20985 SW 84 AVE  
City-State-Zip: CUTLER BAY FL 33189

Title AUTHORIZED MEMBER  
Name COHEN, ARIELLE  
Address 696 NW 38TH AVE  
City-State-Zip: DEERFIELD BEACH FL 33442

Title AUTHORIZED MEMBER  
Name HERNANDEZ, KELLEY  
Address 5751 W WATERFORD DR  
City-State-Zip: DAVIE FL 33331

*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:** ARIELLE COHEN

**OWNER**

**01/12/2023**

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

\_\_\_\_\_ Date