

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000159464

**Entity Name:** ADEL CONSULTING MIAMI, LLC

**Current Principal Place of Business:**

1500 NE MIAMI PL  
2612  
MIAMI, FL 33132

**Current Mailing Address:**

460 NE 28TH ST  
604  
MIAMI, FL 33137 US

**FEI Number:** 86-3476981

**Certificate of Status Desired:** No

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

ALEXANDRE BALLERINI PA  
1111 LINCOLN ROAD, SUITE 500  
SUITE 500  
MIAMI BEACH, FL 33139 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            AMBR  
Name            BOURKIA, ADEL  
Address        460 NE 28TH ST, APT 604  
City-State-Zip: MIAMI FL 33137

*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:** ADEL BOURKIA

AMBR

03/13/2023

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

\_\_\_\_\_  
Date