

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000057209

**FILED**  
**Mar 20, 2012**  
**Secretary of State**

**Entity Name:** DADE PUBLIC ADJUSTERS L.L.C.

**Current Principal Place of Business:**

11767 SOUTH DIXIE HIGHWAY  
MIAMI,, FL 33156

**New Principal Place of Business:**

**Current Mailing Address:**

771 DESTINY PLANTATION BLVD  
BILOXI, MS 39532

**New Mailing Address:**

**FEI Number:** 27-0416125

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 US

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

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

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** LEONI, GABRIEL  
**Address:** 771 DESTINY PLANTATION BLVD  
**City-St-Zip:** BILOXI, MS 39532

**Title:** S  
**Name:** LEONI, GABRIEL  
**Address:** 2825 S.W. 22ND AVE., SUITE 105  
**City-St-Zip:** DELRAY, FL 33445

I hereby certify that the information indicated on this 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 608, Florida Statutes.

**SIGNATURE:** GABRIEL LEONI

MGR

03/20/2012

\_\_\_\_\_  
Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date