# 2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000053005

Entity Name: ADELAMED, LLC

### Current Principal Place of Business:

925 NE 30 TERRACE, STE 202 HOMESTEAD, FL 33033

### **Current Mailing Address:**

20043 SW 103RD AVE CUTLER BAY, FL 33189

# FEI Number: 26-2773479

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

VAZQUEZ, NIVIA E. DR. 925 NE 30 TERRACE, STE 202 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: DR. NIVIA E. VAZQUEZ

Electronic Signature of Registered Agent

#### Authorized Person(s) Detail :

Title	MGRM
Name	VAZQUEZ, NIVIA E. DR.
Address	925 NE 30 TERRACE, STE 202
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: NIVIA E VAZQUEZ

MGRM

02/25/2017

Electronic Signature of Signing Authorized Person(s) Detail

# FILED Feb 25, 2017 Secretary of State CC3237498023

Certificate of Status Desired: No

02/25/2017 Date

Date