

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000024348

**Entity Name:** ADARSHA ADVISORS, LLC

**Current Principal Place of Business:**

833, SCOLLARD COURT  
UNIT 115  
MISSISSAUGA, L5V 2B4, ONTARIO, OO, OC XXXXX

**Current Mailing Address:**

833, SCOLLARD COURT  
UNIT 115  
MISSISSAUGA, L5V 2B4, ONTARIO, OO, OC XXXXX CA

**FEI Number:** 46-2175117

**Certificate of Status Desired:** No

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

MILLER, HAROLD O  
1290 PALM AVENUE, NORTH  
100  
SARASOTA, FL 34236 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 MGRM  
Name CHOKSHI, MITIL  
Address 833 SCOLLARD COURT  
UNIT 15  
City-State-Zip: MISSISSAUGA, L5V 2B4 ONTARIO,  
OO, OC XXXXX

*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:** MITIL CHOKSHI

MGRM

04/28/2016

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

\_\_\_\_\_  
Date