

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000107760

**Entity Name:** ADAPTIVE, LLC

**Current Principal Place of Business:**

8270 WOODLAND CENTER BLVD.  
TAMPA, FL 33614

**Current Mailing Address:**

8270 WOODLAND CENTER BLVD.  
TAMPA, FL 33614 US

**FEI Number:** APPLIED FOR

**Certificate of Status Desired:** No

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

UNITED STATES CORPORATION AGENTS, INC.  
476 RIVERSIDE AVE.  
JACKSONVILLE, FL 32202 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            DEMETROULIS, MELINDA  
Address        5120 LAKECASTLE DR.  
City-State-Zip: TAMPA FL 33624

Title            AMBR  
Name            DEMETROULIS, JOHNNY  
Address        5120 LAKECASTLE DR.  
City-State-Zip: TAMPA FL 33624

*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:** MELINDA DEMETROULIS

AMBR

01/13/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date