

**2026 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000065256

**Entity Name:** ADDSAMDEV FAMILY, LLC

**Current Principal Place of Business:**

1200 EAST LAS OLAS BLVD  
SUITE 103  
FORT LAUDERDALE, FL 33301

**Current Mailing Address:**

1200 EAST LAS OLAS BLVD  
SUITE 103  
FORT LAUDERDALE, FL 33301 US

**FEI Number:** 81-2175813

**Certificate of Status Desired:** No

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

MARCUS, JOEL CPA  
676 W. PROSPECT ROAD  
FORT LAUDERDALE, FL 33309 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 MBR  
Name LOUISE-WEST RUFF, ADDISON  
Address 1200 EAST LAS OLAS BLVD., SUITE 103  
City-State-Zip: FORT LAUDERDALE FL 33301

Title MBR  
Name ELMES, SAMANTHA J  
Address 1200 EAST LAS OLAS BLVD., SUITE 103  
City-State-Zip: FORT LAUDERDALE FL 33301

Title MBR  
Name ELMES, DEVON A  
Address 1200 EAST LAS OLAS BLVD., SUITE 103  
City-State-Zip: FORT LAUDERDALE FL 33301

Title MGR  
Name ELMES, TIM  
Address 1200 EAST LAS OLAS BLVD SUITE 103  
City-State-Zip: FORT LAUDERDALE FL 33301

*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:** TIM ELMES

MGR

04/23/2026

Electronic Signature of Signing Authorized Person(s) Detail

Date