

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000089037

**Entity Name:** ADONIS PLUS, LLC

**Current Principal Place of Business:**

1528 MAINSAIL DR  
#4  
NAPLES, FL 34114

**FILED**  
**Mar 31, 2019**  
**Secretary of State**  
**8623919376CC**

**Current Mailing Address:**

7620 WINDING CYPRESS DR  
NAPLES, FL 34114 US

**FEI Number:** 82-1297994

**Certificate of Status Desired:** Yes

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

WOODWARD, PIRES & LOMBARDO, PA  
606 BALD EAGLE DRIVE  
SUITE 500  
MARCO ISLAND, FL 34145 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 MGR  
Name GRANT, DONELDA S  
Address 1528 MAINSAIL DR, #4  
City-State-Zip: NAPLES FL 34114

Title MGR  
Name GRANT, JAMES IV  
Address 1528 MAINSAIL DR, #4  
City-State-Zip: NAPLES FL 34114

*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:** DONELDA GRANT

**MANAGER**

**03/31/2019**

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

\_\_\_\_\_  
Date