

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L17000129070

**Entity Name:** ADRIALE, LLC**Current Principal Place of Business:**9345 NW 18TH DR  
PLANTATION, FL 33322**Current Mailing Address:**9345 NW 18TH DR  
PLANTATION, FL 33322 US**FEI Number:** 30-0997052**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**ROSALINDA FONSECA PA  
9345 NW 18TH DR  
PLANTATION, FL 33322 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:** ROSALINDA FONSECA

03/09/2021

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name INIGUEZ, A A SR  
Address 9345 NW 18TH DR  
City-State-Zip: PLANTATION FL 33322

Title MGR  
Name FARRERA, A C  
Address 9345 NW 18TH DR  
City-State-Zip: PLANTATION FL 33322

Title MGR  
Name INIGUEZ, A A  
Address 9345 NW 18TH DR  
City-State-Zip: PLANTATION FL 33322

Title MGR  
Name INIGUEZ, A A  
Address 9345 NW 18TH DR  
City-State-Zip: PLANTATION FL 33322

Title MGR  
Name INIGUEZ, A A JR  
Address 9345 NW 18TH DR  
City-State-Zip: PLANTATION FL 33322

*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:** INIGUEZ , A A , SR

MGR

03/09/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date