

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000307884

**Entity Name:** ADAM MULTI SERVICES LLC

**Current Principal Place of Business:**

1600 NE 135 ST  
502  
MIAMI, FL 33181

**Current Mailing Address:**

1600 NE 135 ST  
502  
MIAMI, FL 33181 US

**FEI Number:** 87-1596685

**Certificate of Status Desired:** No

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

ADAM, LEROY  
1600 NE 135TH ST  
502  
MIAMI, FL 33181 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            PRES  
Name            ADAM, LEROY  
Address        1600 NE 135TH STREET  
                  502  
City-State-Zip: MIAMI FL 33181

*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:** LEROY ADAM

**PRESIDENT**

**05/01/2022**

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

\_\_\_\_\_  
Date