

**2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M18000000474

**Entity Name:** ADAPTIVE CLINICAL LLC

**Current Principal Place of Business:**

703 BACK NINE DR  
VENICE, FL 34285

**Current Mailing Address:**

2875 ASHTON RD  
#20322  
SARASOTA, FL 34276 US

**FEI Number:** 80-0778751

**Certificate of Status Desired:** No

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

ADIBI, SINA  
703 BACK NINE DR  
VENICE, FL 34285 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            CEO  
Name            ADIBI, SINA  
Address        703 BACK NINE DR  
City-State-Zip: VENICE FL 34285

*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:** SINA ADIBI

**PRESIDENT**

**01/25/2023**

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

\_\_\_\_\_  
Date