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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 28 2013
D. BUTLER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ADI MARKET, LLC
Name of Limited Liability Company

FILED
13 MAY 24 PM 6:00
OFFICE OF THE CLERK
TALLAHASSEE, FLORIDA

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

RICARDO DE CUBAS
Name of Person

ADI MARKET, LLC
Firm/Company

310 SW 65 AVE.
Address

MIAMI, FLA. 33144
City/State and Zip Code

RDECUBAS @ REGENESTEM.COM
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RICARDO DE CUBAS at 305 586 1330
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

ADIMARKET, LLC

Name of the Limited Liability Company as it now appears on our records.
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 6/05/2012 and assigned
Florida document number L12000074941

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RECORDS & CLERK
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

9100 S. Dadeland Blvd.
Suite 1710
MIAMI FLA. 33156

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

9100 S. Dadeland Blvd.
Suite 1710
MIAMI, Fla 33156

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

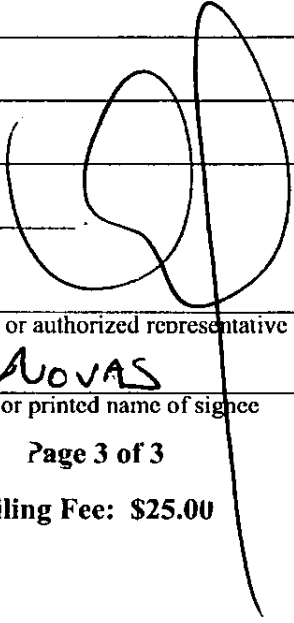
Title	Name	Address	Type of Action
MGR	BENITO NOVAS	10055 SW 218 th ST.	<input type="checkbox"/> Add
		DUTLER BAY FL.	<input checked="" type="checkbox"/> Remove
		33190	
MGR	RADNAD, INC	7849 NW 192 nd STREET	<input type="checkbox"/> Add
		MIAMI, FLA. 33015	<input checked="" type="checkbox"/> Remove
MGRM	GLOBAL STEM	9100 S. DADSWOOD BLVD	<input checked="" type="checkbox"/> Add
	CELLS GROUP, INC.	SUITE 1710	<input type="checkbox"/> Remove
		MIAMI FLA. 33156	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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 CLERK OF THE COURT
 ALLEN COUNTY, FLORIDA

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated

MAY 20, 2012



Signature of a member or authorized representative of a member:

BENITO NOVAS

Typed or printed name of signer

Page 3 of 3

Filing Fee: \$25.00

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13 MAY 21 PM 6:00
TALLAHASSEE, FLORIDA
SECRETARY OF STATE