2281 GRIFFIN FORT LAUDEF	ROAD RDALE, FL 33312			
Current Mai	iling Address:			
2281 GRIFF FORT LAUE	IN ROAD DERDALE, FL 33312 US			
FEI Number: 65-0205843			Certificate of Status Desired: No	
Name and A	Address of Current Registered Agent:			
EGIZI, TONY 2281 GRIFFIN FORT LAUDEF	ROAD RDALE, FL 33312 US			
2281 GRIFFIN FORT LAUDEF		tered office or regis	tered agent, or both, in the State of Flo	rida.
2281 GRIFFIN FORT LAUDEF The above name	RDALE, FL 33312 US	tered office or regis	tered agent, or both, in the State of Flo	<sup>ida.</sup> 06/18/2020
2281 GRIFFIN FORT LAUDEF The above name	RDALE, FL 33312 US d entity submits this statement for the purpose of changing its regis	tered office or regis	tered agent, or both, in the State of Flo	
2281 GRIFFIN FORT LAUDEF The above name SIGNATURE	RDALE, FL 33312 US d entity submits this statement for the purpose of changing its regis TONY EGIZI	tered office or regis	tered agent, or both, in the State of Flo	06/18/2020
2281 GRIFFIN FORT LAUDEF The above name SIGNATURE	RDALE, FL 33312 US d entity submits this statement for the purpose of changing its regis E: TONY EGIZI Electronic Signature of Registered Agent	tered office or regis	tered agent, or both, in the State of Flor	06/18/2020
2281 GRIFFIN FORT LAUDER The above name SIGNATURE Officer/Dire	RDALE, FL 33312 US d entity submits this statement for the purpose of changing its regis E: TONY EGIZI Electronic Signature of Registered Agent ctor Detail :			06/18/2020
2281 GRIFFIN FORT LAUDER The above name SIGNATURE Officer/Dire Title	ADALE, FL 33312 US  d entity submits this statement for the purpose of changing its regis  TONY EGIZI  Electronic Signature of Registered Agent  Ctor Detail :  D, CP	Title	D, CP	06/18/2020

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: J. CARLOS RODRIGUEZ

MANAGER

06/18/2020

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# L81282

## Entity Name: Q-MED CORPORATION

## **Current Principal Place of Business:**

FILED Jun 18, 2020 **Secretary of State** 1541476414CC

Date