#### 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. PRESIDENT

#### SIGNATURE: MAURICIO SIMAN

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# M17360

Entity Name: MADICK DEVELOPERS, INC.

# **Current Principal Place of Business:**

2000 PONCE DE LEON BLVD SUITE 600 CORAL GABLES, FL 33134

#### **Current Mailing Address:**

P.O. BOX 430278 SOUTH MIAMI, FL 33243 US

## FEI Number: 59-2549978

# Name and Address of Current Registered Agent:

SIMAN, CARMEN 2000 PONCE DE LEON BLVD. SUITE # 600 CORAL GABLES, FL 33134 US

FILED Apr 30, 2022 Secretary of State 9839316424CC

Certificate of Status Desired: No

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

## **Officer/Director Detail :**

Title	PD	Title	SD
Name	SIMAN, MAURICIO J.	Name	SIMAN, SARA L.
Address	P.O. BOX 430278	Address	P.O. BOX 430278
City-State-Zip:	SOUTH MIAMI FL 33243	City-State-Zip:	SOUTH MIAMI FL 33243

04/30/2022

Date