# 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L1700000245

Entity Name: MIDORI MED, LLC

## Current Principal Place of Business:

20801 BISCAYNE BLVD SUITE 403 AVENTURA, FL 33180

## **Current Mailing Address:**

3530 MYSTIC POINTE DRIVE APT.1410 AVENTURA, FL 33180 US

## FEI Number: NOT APPLICABLE

### Name and Address of Current Registered Agent:

RUBINOWICZ, BRUCE S. 20801 BISCAYNE BLVD SUITE 403 AVENTURA, FL 33180 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: BRUCE S. RUBINOWICZ

Electronic Signature of Registered Agent

#### Authorized Person(s) Detail :

Title	AMBR
Name	RUBINOWICZ, BRUCE S.
Address	20801 BISCAYNE BLVD SUITE 403
City-State-Zip:	AVENTURA FL 33180

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.

MEMBER

SIGNATURE: BRUCE RUBINOWICZ

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: No

01/21/2020 Date

01/21/2020

Date