

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L17000000245

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

Certificate of Status Desired: No

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

02/27/2018

Electronic Signature of Registered Agent

Date

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.

SIGNATURE: BRUCE S. RUBINOWICZ

AMBR

02/27/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date