2019 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L17000000245

Entity Name: MIDORI MED, LLC

Oct 07, 2019 Secretary of State 6940468917CR

FILED

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 10/07/2019

Electronic Signature of Registered Agent Date

Authorized Person(s) Detail:

Title AMBR

Name RUBINOWICZ, BRUCE S.
Address 20801 BISCAYNE BLVD

SUITE 403

SIGNATURE: BRUCE RUBINOWICZ

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.

Electronic Signature of Signing Authorized Person(s) Detail

REGISTERED AGENT

Date

10/07/2019