

L11000 102001

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

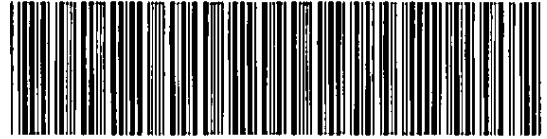
(Business Entity Name)

(Document Number)

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06/22/20 10:34--002 **60.00

FILED

2020 JUN 22 AM 6:47

AUG 07 2020
S. YOUNG

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

MEDICI MEDIA AND PRESS, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 06/06/2011 and assigned
Florida document number L11000102001

FILED
2010 JUN 22 AM 8:47
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF DADE
FLORIDA

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N/A

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

20950 N.E. 27TH COURT

(Principal office address MUST BE A STREET ADDRESS)

SUITE 203

AVENTURA, FLORIDA 33180

Enter new mailing address, if applicable:

20950 N.E. 27TH COURT

(Mailing address MAY BE A POST OFFICE BOX)

SUITE 203

AVENTURA, FLORIDA 33180

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

DR. ALBERTO GALLERANI

New Registered Office Address:

20950 N.E. 27TH COURT, SUITE 203

Enter Florida street address

AVENTURA

, Florida 33180

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.


If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	MARYANN BOGER	17111 BISCAYNE BOULEVARD	<input type="checkbox"/> Add
		SUITE 1002	<input checked="" type="checkbox"/> Remove
		AVENTURA, FLORIDA 33160	<input type="checkbox"/> Change
MGR	DR. ALBERTO GALLERANI	20950 N.E. 27TH COURT	<input checked="" type="checkbox"/> Add
		SUUIITE 203	<input type="checkbox"/> Remove
		AVENTURA, FLORIDA 33180	<input type="checkbox"/> Change
AMBR	DR. ALBERTO GALLERANI	20950 N.E. 27TH COURT	<input checked="" type="checkbox"/> Add
		SUITE 203	<input type="checkbox"/> Remove
		AVENTURA, FLORIDA 33180	<input type="checkbox"/> Change
P	DR. ALBERTO GALLERANI	20950 N.E. 27TH COURT	<input checked="" type="checkbox"/> Add
		SUITE 203	<input type="checkbox"/> Remove
		AVENTURA, FLORIDA 33180	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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