Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : HAHN LOESER & PARKS

Account Number : 120070000069

Phone : (239)254-2924 Fax Number : (239)592-7716 R IVH.IE

SIP 1 0 2020

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN MEDICI MEDIA AND PRESS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	06
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

Help

Channel-3

Melanie Scire

(((H20000318662 3))) **COVER LETTER**

TO: Registration ! Division of Co			
MEDICI SUBJECT:	MEDIA AND PRESS, LLC		
SUBJECT:	Name of Lir	mited Liability Company	
Mr. and and Andalas a	f to an decree of fines	l to the fee	
	f Amendment and fee(s) are suit condence concerning this matter	•	
ricado iciada da ocircop	waste conserning and marter	to die tonowing.	
	Bonie Montalvo		·
		Name of Person	·
	Hahn Loeser & Parks, LL	.P	
		Firm/Company	· · · · · · · · · · · · · · · · · · ·
	5811 Pelican Bay Blvd St	uite 650	
		Address	
	Naples, FL 34108		
		City/State and Zip Code	
	BMONTALVO@HAHNL	AW.COM (to be used for future annual report notif	ication)
For further information of	concerning this matter, please o		nearion)
BONIE MONTALVO	· · · · · ·	239 451-4004	
Name o	of Person	at () Area Code Daytime	e Telephone Number
Enclosed is a check for t	<u>-</u>	_	
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Malling Addres</u> Registration (Street Address: Penistration Sec	tion
Division of C		Registration Sec Division of Corp	
P.O. Box 632 Tallahassee, 1		The Centre of T	
rananassee,	CL 34314	2413 N. Monroe	Street, Suite 810

Tallahassee, FL 32303

(((H20000318662 3))) ARTICLES OF AMENDMENT TO

ARTICLES OF ORGANIZATION OF 2021

MEDICI MEDIA AND PRESS, I	LC		
		ny as It now appears on o Liability Company)	ur records.)
The Articles of Organization for this Limited in Florida document number L11000102001			
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liab	ility company here:	
The new name must be distinguishable and contain the	words "I imited I ishi	lity Company " the designa	tion "I I C" or the abbreviation "I I C"
-		17111 Biscayne Bou	
Enter new principal offices address, if appli Principal office address MUST BE A STRE		Suite 1002	
Trincipal office and tess most be a state	<u>ca appicos</u>	Aventura, FL 33160	-
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		17111 Biscayne Boulevard Suite 1002	
		Aventura, FL 33160	
3. If amending the registered agent and/or gent and/or the new registered office addr		address on our record	s, enter the name of the new regist
Name of New Registered Agent:	MARYANN B	. BOGER	
Name of New Registered Agent:		BOGER Boulevard, Suite 1002	
			eet address
Name of New Registered Agent:		e Boulevard, Suite 1002	eei address , Florida 33160 Zip Code

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

(((H200003186623)))

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>	Name	Address	Type of Action
MGR	Dr. Alberto Gallerani	20950 NE 27TH COURT	□Add
		STE 203	= Remove
		AVENTURA, FL 33180	□ Change
AMBR	Dr. Alberto Gallerani	20950 NE 27TH COURT	
		STE 203	
		AVENTURA, FL 33180	☐ Change
P	Dr. Alberto Gulierani	20950 NE 27TH COURT	□Add
		STE 203	Remove
		AVENTURA, FL 33180	□Change
MGR	MARYANN B. BOGER	17111 Biscayne Boulevard, Suite 1002	— — — — — — — — — — — — — — — — — — —
		Suite 1002	□Remove
		AVENTURA, FL 33180	DChange
			□ Add
			□Remove
			□Add
			□Remove
			□ Change

(((H20000318662 3)))

Melanie Scire

Effective date, if other than the date of filing: (optional) If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605 0207 Nate: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of (b). The 90th day after the rd is filed. Dated 9/8/2020 Signature of stranger of stranger of the part of the part of the stranger of the part of the part of the stranger of the part of t	If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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Signature of a member of a member		
	Dated _	9/8/2020 Manay Bacer
MARYANN B. BOGER		Signature of a member of a member
		MARYANN B BOGER

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STATEMENT OF FACTS

The undersigned, MARYANN B. BOGER, makes the following Statement of Facts to the Florida Division of Corporations:

- MARYANN B. BOGER is and has been the <u>sole member</u> of MEDICI MEDIA AND PRESS, LLC, a Florida Limited Liability Company ("Company") since the Articles of Organization were filed with the State of Florida, Division of Corporations effective as of September 6, 2011.
- 2. The Company's document number as filed with the Division of Corporation is L11000102001.
- 3. MARYANN B. BOGER and ALBERTO S. GALLERANI, served as the initial managers of the Company, and jointly managed the Company from September 6, 2011 to December 3, 2015.
- 4. MARYANN B. BOGER, pursuant to Florida Statue Section 605.04072(4), as sole member holding all the interests in the Company, <u>removed</u> ALBERTO S. GALLERANI as manager of the Company on December 3, 2015.
- 5. On June 22, 2020, ALBERTO S. GALLERANI, without authorization of MARYANN B. BOGER, the sole member and manager of the Company, filed Articles of Amendment to the Articles of Organization of the Company (hereinafter "Unauthorized Amendment"), and unlawfully remove MARYANN B. BOGER as manager of the company, adding himself as Registered Agent, Manager and President of the Company and further unlawfully changed the principal place of business and mailing address of the Company, even though he (1) was not a member of the Company, (2) was not an authorized representative of the Company, and (3) no longer had any authority to act on behalf of the Company as manager, and (4) was not nor had he ever been a member of the Company.
- 6. MARYANN B. BOGER, now come forth to notify the Florida Division of Corporations as to the Unauthorized Amendment and to clearly state that:
 - a. ALBERTO S. GALLERANI, has never been a member of the Company.
 - b. ALBERTO S. GALLERANI is NOT authorized to act on behalf of the Company or on behalf of the sole member, and that any action by ALBERTO

9/14/2020 12:46:29 PM

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S. GALLERANI after his removal as manager on December 3, 2015, is unauthorized is unauthorized and may be subject to liability and recovery for loss pursuant to Florida Statute Section 605.0205.

NOW, THEREFORE, MARYANN B. BOGER, does hereby affirm the above stated facts.

Maryann B. Boger Date: 9 / 8 /2020

STATE OF FLORIDA COUNTY OF Dade

The foregoing instrument was acknowledged before me by means of physical presence or online notarization, this day of September, 2020, by MARYANN B. BOGER, who is personally known to me, or who has produced a driver's license as identification, and who did not take an oath.

State of Florida

My Commission Expires: Ay. 1, 2022

(Printed, typ

Notary Public - State of Flonda

Commission # GG 244421

My Comm. Expires Aug 1, 2022

Bonded through National Notary Assn.