

212000074941

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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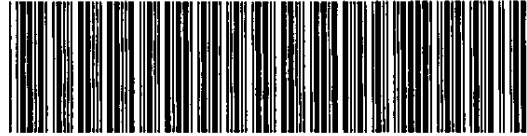
(Business Entity Name)

(Document Number)

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13 MAY 24 PM 6:00  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

MAY 28 2013  
D. BUTLER

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: ADIMARKET, LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

RICARDO DECURAS  
Name of Person

ADI MARKET, LLC  
Firm/Company

310 SW 65 AVE.  
Address

MIAMI, FLA. 33144  
City/State and Zip Code

RDECUBAS @ REGENESTEM.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

RICARDO DECURAS at 305.586.1330  
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee  
☐ \$30.00 Filing Fee & Certificate of Status  
☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)  
☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

FILED  
13 MAY 24 PM 6:00  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

ADIMARKET, 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 6/05/2012 and assigned  
Florida document number L12000074941

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TALLAHASSEE, FLORIDA

This amendment is submitted to amend the following:

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

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

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

9100 S. Dadeland Blvd.  
Suite 1710  
Miami, Fla. 33156

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

9100 S. Dadeland Blvd.  
Suite 1710  
Miami, Fla 33156

**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:

New Registered Office Address:

Enter Florida street address

, Florida

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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	BENITO NOVAS	10055 SW 218 <sup>th</sup> ST. DUTLER BAY FL. 33190	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	RADNAD, INC	7849 NW 192 <sup>nd</sup> STREET Miami, Fla. 33015	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	GLOBAL STEM CELLS GROUP, INC.	9100 S. Dadeland Blvd SUITE 1710 MIAMI FLA. 33156	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

13 MAY 24 PM 6:00  
CLERK OF THE COURT  
ALFRED E. BROWN  
TALLAHASSEE, FLORIDA

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated

MAY 20, 2012

Signature of a member or authorized representative of a member:

BENITO NOVAS

Typed or printed name of signer

Page 3 of 3

Filing Fee: \$25.00

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13 MAY 24 PM 6:00  
CLERK OF CIRCUIT  
JUDGE  
TALLAHASSEE, FLORIDA