

L21000092894

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

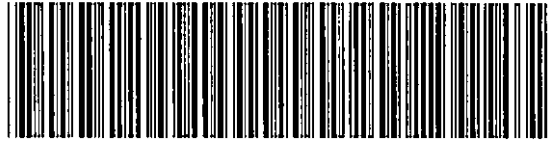
(Business Entity Name)

(Document Number)

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2022 MAY -6 AM 6:32  
SECRETARY OF STATE  
TALLAHASSEE, FL

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MAY 04 2022

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED

2022 MAY -6 AM 6: 32

M & P LAB INVESTMENTS, LLC

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

SECRETARY OF STATE

TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 2/4/2021 and assigned  
Florida document number L21000092894.

This amendment is submitted to amend the following:

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

MLAB INVESTMENTS, LLC

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:**

6439 BELLAMALFI STREET

**(Principal office address MUST BE A STREET ADDRESS)**

BOCA RATON, FLORIDA 33496

**Enter new mailing address, if applicable:**

6439 BELLAMALFI STREET

**(Mailing address MAY BE A POST OFFICE BOX)**

BOCA RATON, FLORIDA 33496

**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:

MINDY LABINER

New Registered Office Address:

6439 BELLAMALFI STREET

*Enter Florida street address*

BOCA RATON

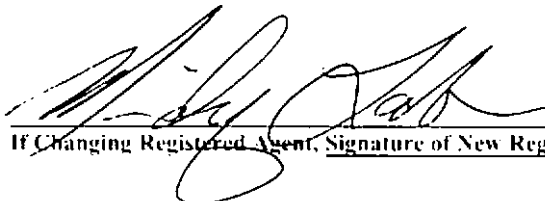
*City*

Florida 33496

*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	PAUL LABINER	5499 NO FEDERAL HWY., SUITE K	<input type="checkbox"/> Add
		BOCA RATON, FLORIDA 33487	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	MINDY LABINER	6439 BELLAMALFI STREET	<input checked="" type="checkbox"/> Add
		BOCA RATON, FLORIDA 33496	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

MEMBER - MINDY LABINER

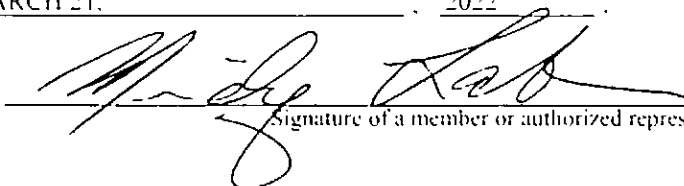
**F. Effective date, if other than the date of filing:** \_\_\_\_\_ **(optional)**

*(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 (3)(b)*

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If 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 record is filed.

Dated MARCH 21, \_\_\_\_\_, 2022



Signature of a member or authorized representative of a member

MINDY LABINER

Typed or printed name of signer