

# L21000207078

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : LAZARUS CORPORATE FILING SERVICE, INC.  
Account Number : I20000000019  
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Email Address: \_\_\_\_\_

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
GLOBAL MEDICAL TRIALS LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$25.00

2022 APR -5 PM 4:43

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K. SALY

APR - 6 2022

**Articles of Amendment to LLC Articles of Organization of**GLOBAL MEDICAL TRIALS LLC

The Articles of Organization for this Limited Liability Company were filed on  
12-16-2021 and assigned Florida document number  
121000207078

This amendment is submitted to amend the following:

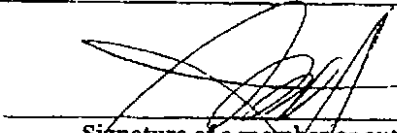
- ADD: BATSHEVA AVRAHAM  
AS A MBR IN 8743 SW 9TH AVE No 4  
MIAMI FLORIDA 33174

- ADD: HEIDY C MARTINEZ AS: A MBR  
IN 8743 SW 9TH AVE No 4 MIAMI FLORI  
DA 33174

- ADD IN THE NAME: INSTITUTE  
AS: GLOBAL MEDICAL TRIALS INSTITUTE  
LLC

These articles of amendment were adopted on 4-4-2022

Dated \_\_\_\_\_

  
Signature of a member or authorized representative of a member

HERIDA PEREZ  
Typed or printed name of signee

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

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

\_\_\_\_\_  
Signature of New Registered Agent, if changing

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ALABAMA SECRETARY OF STATE

T02000000419

(Requestor's Name)

(Address)

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03/18/22--01003--028 \*\*96.25

APR 18 2022

APR 18 2022

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K. SALY

APR - 6 2022

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** DRAFT DAY DASH  
\_\_\_\_\_  
(Name of Mark Registered)

Dear Sir or Madam:

The enclosed Mark Renewal Application, specimen and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joshua Schleifer  
\_\_\_\_\_  
(Name of Person)

National Football League  
\_\_\_\_\_  
(Firm/Company)

345 Park Avenue  
\_\_\_\_\_  
(Address)

New York, NY 10154  
\_\_\_\_\_  
(City/State and Zip Code)

For further information concerning this matter, please call:

Joshua Schleifer                      212                      450-2554  
\_\_\_\_\_  
(Name of Person)                      at (                      )                      (Area Code & Daytime Telephone Number)

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, Florida 32303

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

**FILING FEE: \$87.50 per class**  
**CERTIFICATE OF RENEWAL: \$ 8.75 (OPTIONAL)**

**(NOTE:** The information contained in this cover letter will be included in the permanent record and will be available to the general public.)

## MARK RENEWAL APPLICATION

Name and Mailing Address of Owner:

Buccaneers Team LLC
One Buccaneer Place, Tampa, Florida 33607

Return To: Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

1) Mark Registered: DRAFT DAY DASH

2) Registration Number: T02000000419

3) Date Filed: 4/15/2002 4.) Renewal Date: 4/15/2022 5.) Class(es) Filed: 41

6) Renewal statement pursuant to section 495.071, Florida Statutes. Below you must state the mark is still in use in Florida or state the reason for its nonuse is not due to any intention to abandon the mark.

The mark is still in use in the state of Florida

7) If the mark is still in use, a specimen showing actual use of the mark is included with this application.

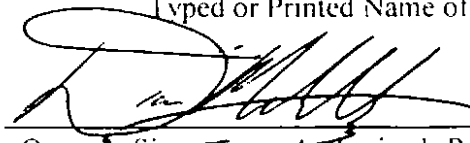
8) If applicant is a business entity, enter the state of incorporation/formation/organization: DE

Fee: \$87.50 Per Class

Certificate of Renewal: \$8.75  
(Optional)

Dan Malasky

Typed or Printed Name of Owner



Owner's Signature or Authorized Person's Signature

STATE OF FLORIDA  
COUNTY OF Hillsborough

Sworn to (or affirmed) and subscribed before me by means of ☒ physical presence or ☐ online notarization, this (numeric date) this 22nd day of February, 2022, by ( Dan Malasky ).

numeric date

month

year

name of person making statement



Notary Public's Signature

Emily Lekahal

Notary Public's Printed Name

Personally Known ☒ OR Produced Identification ☐

Type of Identification Produced: \_\_\_\_\_

