

**2020 FLORIDA PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P93000034686

**Entity Name:** GALIX BIOMEDICAL INSTRUMENTATION, INC.

**Current Principal Place of Business:**

8205 NW 30TH TERRACE  
DORAL, FL 33122

**Current Mailing Address:**

8205 NW 30TH TERRACE  
DORAL, FL 33122 US

**FEI Number:** 65-0426433

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CORDOVA, ANGEL D  
780 NW 42 AVENUE  
SUITE 325  
MIAMI, FL 33126 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

SIGNATURE: ANGEL D CORDOVA

10/14/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	PD	Title	VP
Name	GAVRIELIDES, JORDAN	Name	GAVRIELIDES, ALEXIS JORDAN
Address	780 N.W. 42 AVE. SUITE #325	Address	BOUCHARD 1185 LA LUCIA
City-State-Zip:	MIAMI FL 33126	City-State-Zip:	BUENOS AIRES 1637

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

SIGNATURE: JORDAN GAVRIELIDES

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10/14/2020

Electronic Signature of Signing Officer/Director Detail

Date