

**2023 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L17000177395

**Entity Name:** MJ MED MANAGEMENT LLC

**Current Principal Place of Business:**

10026 BOYNTON PLACE CIR  
APT 515  
BOYNTYON, FL 33437

**Current Mailing Address:**

10026 BOYNTON PLACE CIR  
APT 515  
BOYNTYON, FL 33437

**FEI Number:** 82-2521459

**Certificate of Status Desired:** No

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

PIERRE, LOUIS B  
5718 LINCOLN CIR  
LAKE WORTH, FL 33463 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:** PIERRE LOUIS B

03/08/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name BLANC, NICOLE  
Address 6071 WILDFIRE WAY  
City-State-Zip: WEST PALM BEACH FL 33415

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** NICOLE BLANC

MANAGER

03/08/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date