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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SUSAN F. SOCAS

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

DOCUMENT# 765068

Entity Name: 555 MEDICAL CENTER ASSOCIATION, INC.

Current Principal Place of Business:

555 BILTMORE WAY CORAL GABLES, FL 33134

Current Mailing Address:

555 BILTMORE WAY SUITE 202 CORAL GABLES, FL 33134 US

FEI Number: 59-2237940

Name and Address of Current Registered Agent:

SOCAS, SUSAN F DR. 555 BILTMORE WAY SUITE 202 CORAL GABLES, FL 33134 US gistered Agent:

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: DR. SUSAN F. SOCAS							
	Electronic Signature of Registered Agent			Date			
Officer/Director Detail :							
Title	PRESIDENT	Title	VP				
Name	SOCAS, SUSAN F.	Name	GARCIA, FAUSTINO				
Address	555 BILTMORE WAY, SUITE 202	Address	555 BILTMORE WAY, SUITE 10)2			
City-State-Zip:	CORAL GABLES FL 33134	City-State-Zip:	CORAL GABLES FL 33134				
Title	SECRETARY	Title	TREASURER				
Name	INTERIAN, CARLOS	Name	TORRENTE, ALICIA				
Address	555 BILTMORE WAY, 206	Address	555 BILTMORE WAY SUITE 101				
City-State-Zip:	CORAL GABLES FL 33134	City-State-Zip:	CORAL GABLES FL 33134				

Certificate of Status Desired: No

FILED Mar 27, 2018 Secretary of State CC5597931943

> 03/27/2018 Date