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: LUIS IZQUIERDO

Electronic Signature of Signing Officer/Director Detail

PRESIDENT & CEO

04/20/2017 Date

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000079171

Entity Name: ACCESS MEDICAL GROUP OF NORTH MIAMI BEACH, INC.

Current Principal Place of Business:

6100 BLUE LAGOON DRIVE SUITE 365 MIAMI, FL 33126

Current Mailing Address:

6100 BLUE LAGOON DRIVE SUITE 365 MIAMI, FL 33126 US

FEI Number: 45-3191569

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:

Electronic Signature of Registered Agent

Officer/Director Detail :

Title	DPCEOS	Title	D
Name	IZQUIERDO, LUIS H	Name	CROSBY, CHRISTOPHER
Address	6100 BLUE LAGOON DRIVE SUITE 365	Address	6100 BLUE LAGOON DRIVE SUITE 365
City-State-Zip:	MIAMI FL 33126	City-State-Zip:	MIAMI FL 33126
Title	D	Title	D
Title Name	D HILINSKI, SCOTT	Title Name	D VINCIGUERRA, CHRISTOPHER
	-		
Name	HILINSKI, SCOTT 6100 BLUE LAGOON DRIVE	Name	VINCIGUERRA, CHRISTOPHER 6100 BLUE LAGOON DRIVE

Certificate of Status Desired: No

FILED Apr 20, 2017 Secretary of State CC6294634870

Date