		Certificate of Status Desir		
Name and Address of Current Registered Agent:				
SUAREZ, YELANY 2721 SW 137TH AVE SUITE 112 MIAMI, FL 33175 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	: YELANY SUAREZ			04/05/2022
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	Р	Title	VP	
Name	SUAREZ, YELANY	Name	FLORES, DANNY	
Address	2721 SW 137TH AVE SUITE 112	Address	2721 SW 137TH AVE SUITE 112	
City-State-Zip:	MIAMI FL 33175	City-State-Zip:	MIAMI FL 33175	

2721 SW 137TH AVE SUITE 112

MIAMI, FL 33175

DOCUMENT# P12000029340

**Current Principal Place of Business:** 

2721 SW 137TH AVE SUITE 112 MIAMI, FL 33175 US

## FEI Number: 45-4927552

## Na

Entity Name: MEDMAX MEDICAL CENTER, INC.

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: SUAREZ, YELANY

04/05/2022 Date

2022 FLORIDA PROFIT CORPORATION ANNUAL REPORT

## Certificate of Status Desired: No

FILED Apr 05, 2022 Secretary of State 8360712291CC

Electronic Signature of Signing Officer/Director Detail

PRESIDENT