2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 14, 2015
Secretary of State
CC9405856035

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Entity Name: 2TH DOCS, LLC

Current Principal Place of Business:

1001 SOUTH LOOP BOULEVARD
LEHIGH ACRES, FL 33936

Current Mailing Address:

1001 SOUTH LOOP BOULEVARD
LEHIGH ACRES, FL 33936

FEI Number: 20-2748995

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

GEAR, BRIAN LDMD
1001 SOUTH LOOP BOULEVARD
LEHIGH ACRES, FL 33936 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 — Date

Authorized Person(s) Detail :

Title	MGRM	Title	MGRM
Name	GEAR, BRIAN LDMD	Name	OAKES-LOTTRIDGE, DENISE DMD
Address	1001 SOUTH LOOP BOULEVARD	Address	1001 SOUTH LOOP BLVD.
City-State-Zip:	LEHIGH ACRES FL 33936	City-State-Zip:	LEHIGH ACRES FL 33936

Title	MGRM
Name	SCHEEL, MIGUEL DMD
Address	1001 SOUTH LOOP BLVD.
City-State-Zip:	LEHIGH ACRES FL 33936

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: BRIAN GEAR DENTIST 01/14/2015

Electronic Signature of Signing Authorized Person(s) Detail — Date