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

SIGNATURE: RICHARD HOCHMAN

Electronic Signature of Signing Authorized Person(s) Detail

DOCUMENT# L05000099048

Entity Name: FLORIDA FOOT & ANKLE ASSOCIATES, LLC

Current Principal Place of Business:

8200 NW 27 STREET SUITE 108 DORAL, FL 33122

Current Mailing Address:

8200 NW 27 STREET SUITE 108 DORAL, FL 33122 US

FEI Number: 14-1941024

Name and Address of Current Registered Agent:

HOCHMAN, RICHARD DR. 1321 NW 14TH STREET SUITE 103 MIAMI, FL 33125 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: RICHARD HOCHMAN				07/20/2013	
	Electronic Signature of Registered Agent			Date	
Authorized Person(s) Detail :					
Title	OTHER	Title	MGR		
Name	RINGLER, ADAM DR.	Name	HOCHMAN, RICHARD DPM		
Address	8200 NW 27 STREET	Address	8200 NW 27 STREET, #108		
City-State-Zip:	SUITE 108 DORAL FL 33122	City-State-Zip:	DORAL FL 33122		
Title	MGR				
Name	DETWEILER, MICHELLE DPM				
Address	8200 NW 27 STREET, #108				
City-State-Zip:	DORAL FL 33122				

PRESIDENT

07/20/2013

FILED Jul 20, 2013 Secretary of State CC1240373548

Certificate of Status Desired: No

Date