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: ROMUALDO SEGUROLA MD	PRES

Electronic Signature of Signing Authorized Person(s) Detail

FEI Number: 26-1869015 Name and Address of Current Registered Agent:	Certificate of Status Desired: No
EEI Number: 26 1960015	Contificate of Status Desired. No.
SUITE 208 DORAL, FL 33166 US	

Name and Address of Current Registered Agent:

LAW OFFICES OF MAX A ADAMS ESQ PLLC 2151 S LEJEUNE RD SUITE 306 CORAL GABLES, FL 33134 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	E: MAX A ADAMS ESQ			01/10/2017	
		Electronic Signature of Registered Agent			Date	
Authorized Person(s) Detail :						
	Title	MGR	Title	AUTHORIZED MEMBER		
	Name	SEGUROLA, ROMUALDO J JR	Name	REGO, ALFREDO		
	Address	12620 RAMIRO STREET	Address	10800 BLUE PALM STREET		
	City-State-Zip:	CORAL GABLES FL 33156	City-State-Zip:	PLANTATION FL 33324		

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT DOCUMENT# L08000010961

Entity Name: CENTER FOR THE TECHNOLOGICAL ADVANCEMENT OF CARDIOVASCULAR & THORACIC SURGERIES, LLC

Current Principal Place of Business:

3650 NW 82ND AVENUE SUITE 208 DORAL, FL 33166

Current Mailing Address:

3650 NW 82ND AVENUE

FILED Jan 10, 2017 Secretary of State CC9371800054

01/10/2017 Date