## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000006464

Entity Name: MIAMI DADE PRIMARY CARE, LLC

**Current Principal Place of Business:** 

3181 CORAL WAY4TH FLOOR 4TH FLOOR MIAMI, FL 33145

## **Current Mailing Address:**

3181 CORAL WAY4TH FLOOR 4TH FLOOR MIAMI, FL 33145

FEI Number: 26-4097717 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

SACHER, CHARLES P 2655 LEJEUNE ROAD, SUITE 1101 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:

**Electronic Signature of Registered Agent** 

Date

FILED Jan 10, 2015

**Secretary of State** 

CC0211892033

## Authorized Person(s) Detail:

Title MGR Title MGR

Name CARRILLO, RAMON M.D. Name GONZALEZ, RAYDA N.P.

Address 3181 CORAL WAY 4TH FLOOR Address 3181 CORAL WAY 4TH FLOOR

City-State-Zip: MIAMI FL 33145 City-State-Zip: MIAMI FL 33145

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.