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. 01/24/2022 PD

MIAMI, FL 33145 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

Authorized Person(s) Detail :			
Title	PD	Title	VP
Name	MAS, ILDEFONSO J	Name	MAS, RAFAEL J
Address	3181 CORAL WAY 5TH FLOOR	Address	3181 CORAL WAY 5TH FLOOR
City-State-Zip:	MIAMI FL 33145	City-State-Zip:	MIAMI FL 33145

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L0900009848

Entity Name: MIAMI CARDIOVASCULAR SERVICES, LLC

Current Principal Place of Business:

3181 CORAL WAY **5TH FLOOR** MIAMI, FL 33145

Current Mailing Address:

3181 CORAL WAY MIAMI, FL 33145

FEI Number: 26-4225154

Name and Address of Current Registered Agent:

5TH FLOOR

MAS, ILDEFONSO J 3181 CORAL WAY **5TH FLOOR**

SIGNATURE: ILDEFONSO J MAS MD Electronic Signature of Signing Authorized Person(s) Detail Date

Date

FILED Jan 24, 2022 Secretary of State 3405538769CC

Certificate of Status Desired: No