2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 30, 2013
Secretary of State
CC2232284946

DOCUMENT# L10000018091

Entity Name: MCM PHYSICIAN SERVICES, LLC

Current Principal Place of Business:

600 HERITAGE DRIVE
SUITE 105
JUPITER, FL 33458

Current Mailing Address:

P.O. BOX 69
JUPITER, FL 33468

FEI Number: 27-1960192

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHIKARA FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP
600 HERITAGE DRIVE
SUITE 105
JUPITER, FL 33458 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: MAZIN SHIKARA 04/30/2013

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MGRM
Name	SHIKARA FAMILY LIMITED LIABILITY LIMITED PARTNERSHIP
Address	600 HERITAGE DRIVE SUITE 105
City-State-Zip:	JUPITER FL 33458

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: MAZIN SHIKARA PRES 04/30/2013

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