## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000046198

Entity Name: SFM RADIATION, LLC

**Current Principal Place of Business:** 

3343 STATE ROAD 7 WELLINGTON, FL 33449

**Current Mailing Address:** 

3343 STATE ROAD7 WELLINGTON, FL 33449

FEI Number: 27-2549616 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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.

Title

MGR

SIGNATURE:

Electronic Signature of Registered Agent

Date

FILED Feb 24, 2015

**Secretary of State** 

CC2149426863

Authorized Person(s) Detail:

Title MGRM

Name SOUTH FLORIDA MEDICINE, LLC Name PATEL, RAVI

Address 3343 STATE ROAD 7 Address 3343 STATE ROAD 7

City-State-Zip: WELLINGTON FL 33449 City-State-Zip: WELLINGTON FL 33449

Title MGR

Name DASS, KISHORE

Address 3343 STATE ROAD 7

City-State-Zip: WELLINGTON FL 33449

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: RAJIV PATEL MANAGING DIRECTOR

Electronic Signature of Signing Authorized Person(s) Detail

02/24/2015 Date