2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000056051

Entity Name: AMERICARE RENAL CENTER, LLC

Current Principal Place of Business:

2601 SW 37TH AVE STE 138 CORAL GABLES, FL 33133

Current Mailing Address:

2601 SW 37TH AVE **STE 138** CORAL GABLES, FL 33133

FEI Number: 27-3007766

Name and Address of Current Registered Agent:

GONZALEZ, CARLOS J 2601 SW 37TH AVE. STE 138 CORAL GABLES, FL 33133 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 -

City-State-Zip: CORAL GABLES FL 33133

Person(s) Detail :		
MGR	Title	MGRM
DUMENIGO, FEDERICO	Name	GONZALEZ, CARLOS J
2601 SW 37TH AVE STE 138	Address	2601 SW 37TH AVE STE 138
CORAL GABLES FL 33133	City-State-Zip:	CORAL GABLES FL 33133
DIRECTOR		
GONZALEZ, CHRISTOPHER		
2601 SW 37TH AVE STE 138		
	MGR DUMENIGO, FEDERICO 2601 SW 37TH AVE STE 138 CORAL GABLES FL 33133 DIRECTOR GONZALEZ, CHRISTOPHER 2601 SW 37TH AVE	MGRTitleDUMENIGO, FEDERICOName2601 SW 37TH AVEAddressSTE 138City-State-Zip:CORAL GABLES FL 33133City-State-Zip:DIRECTORJIRECTORGONZALEZ, CHRISTOPHER2601 SW 37TH AVE

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: CARLOS J. GONZALEZ

MANAGER

03/15/2016

Electronic Signature of Signing Authorized Person(s) Detail

FILED Mar 15, 2016 Secretary of State CC3712788270

Certificate of Status Desired: No

Date