

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000009235

Entity Name: SOUTH FLORIDA PROVIDER NETWORK LLC

Current Principal Place of Business:

160 CONGRESS PARK DRIVE
SUITE 101
DELRAY BEACH, FL 33445

Current Mailing Address:

160 CONGRESS PARK DRIVE
SUITE 101
DELRAY BEACH, FL 33445 US

FEI Number: 27-4639802

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SEIGEL, MARTY R
160 CONGRESS PARK DR
SUITE 101
DELRAY BEACH, FL 33445 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

Authorized Person(s) Detail :

Title MGRM
Name SEIGEL, MARTY R
Address 160 CONGRESS PARK DR
SUITE 101
City-State-Zip: DELRAY BEACH FL 33445

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: MARTY R SEIGEL

PRESIDENT

01/12/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date