

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000110822

Entity Name: FLAGLER INVESTMENT HEALTHCARE LLC

Current Principal Place of Business:

TWO SOUTH BISCAYNE BOULEVARD
SUITE 1800
MIAMI, FL 33131

Current Mailing Address:

TWO SOUTH BISCAYNE BOULEVARD
SUITE 1800
MIAMI, FL 33131 US

FEI Number: 35-2425088

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHOUKROUN, DIDIER
TWO SOUTH BISCAYNE BOULEVARD
SUITE 1800
MIAMI, FL 33131 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 MGR
Name CHOUKROUN, DIDIER
Address 21 LA GORCE CIRCLE
City-State-Zip: MIAMI BEACH FL 33141

Title MGR
Name COOTS, CHRIS
Address 5225 FAIRCHILD WAY
City-State-Zip: MIAMI FL 33156

Title MGR
Name PUYPLAT, HERVE
Address 15 HUDSON AVENUE
City-State-Zip: OCEAN RIDGE FL 33435

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: DIDIER CHOUKROUN

MGR

02/02/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date