## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# L12000075968

Entity Name: SFM RADIATION II, LLC

#### **Current Principal Place of Business:**

3343 STATE ROAD 7 WELLINGTON. FL 33449

### **Current Mailing Address:**

3343 STATE ROAD 7 WELLINGTON, FL 33449

## FEI Number: 37-1694921

### 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.

#### SIGNATURE:

Electronic Signature of Registered Agent

#### Authorized Person(s) Detail :

Title MGRM Name SOUTH FLORIDA MEDICINE, LLC 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

02/24/2015 MANAGING DIRECTOR

Electronic Signature of Signing Authorized Person(s) Detail

Certificate of Status Desired: No

Date

# FILED Feb 24, 2015 Secretary of State CC1703742446