

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000009657

**Entity Name:** ARIG MEDICAL PRACTICE GROUP, LLC

**Current Principal Place of Business:**

2695 S. LE JEUNE ROAD  
SUITE 300  
CORAL GABLES, FL 33134

**Current Mailing Address:**

2695 S. LE JEUNE ROAD  
SUITE 300  
CORAL GABLES, FL 33134 US

**FEI Number:** 46-2306459

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GBBPL REGISTERED AGENTS, LLC  
100 ALMERIA AVE SUITE 340  
CORAL GABLES, FL 33134 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:** EDUARDO RUBIO

03/17/2015

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name IGLESIAS, ROLANDO  
Address 2695 S. LE JEUNE ROAD  
SUITE 300  
City-State-Zip: CORAL GABLES FL 33134

Title MGR  
Name ARANA, JULIAN  
Address 2695 S. LE JEUNE ROAD  
SUITE 300  
City-State-Zip: CORAL GABLES FL 33134

Title MGR  
Name RUBIO, EDUARDO  
Address 2695 S. LE JEUNE ROAD  
SUITE 300  
City-State-Zip: CORAL GABLES FL 33134

*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:** EDUARDO RUBIO

MGR

03/17/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date