2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jul 18, 2016
Secretary of State
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Entity Name: SOUTH FLORIDA MEDICAL NETWORK, LLC

Current Principal Place of Business:

10899 SW 72ND ST
SUITE 203
MIAMI, FL 33173

Current Mailing Address:

10899 SW 72ND ST
SUITE 203
MIAMI, FL 33173 US

FEI Number: 46-5231609

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARTINEZ, HUGO
10899 SW 72ND ST
SUITE 203
MIAMI, FL 33173 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	MARTINEZ, HUGO
Address	10899 SW 72ND ST SUITE 203
City-State-Zip:	MIAMI FL 33173

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: HUGO MARTINEZ MGR 07/18/2016

Electronic Signature of Signing Authorized Person(s) Detail — Date