2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 26, 2018
Secretary of State
CC1722022461

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Entity Name: RADIOLOGY SERVICES OF JUPITER MEDICAL SPECIALISTS, LLC

Current Principal Place of Business:

7700 WEST SUNRISE BOULEVARD
MAIL-STOP PL-6
PLANTATION, FL 33322

Current Mailing Address:

7700 WEST SUNRISE BOULEVARD
MAIL-STOP PL-6
PLANTATION, FL 33322 US

FEI Number: 38-3930294

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: JILLIAN MARCUS 04/26/2018

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MANAGER	Title	MANAGER
Name	SEELEY, STEVEN	Name	JACKSON, BRIAN
Address	7700 WEST SUNRISE BOULEVARD MAIL-STOP PL-6	Address	7700 WEST SUNRISE BOULEVARD MAIL-STOP PL-6
City-State-Zip:	PLANTATION FL 33322	City-State-Zip:	PLANTATION FL 33322
Title	MANAGER	Title	MANAGER
Name	FOX, LEE	Name	DYTRYCH, MARTIN
Address	7700 WEST SUNRISE BOULEVARD MAIL-STOP PL-6	Address	7700 WEST SUNRISE BOULEVARD MAIL-STOP PL-6
City-State-Zip:	PLANTATION FL 33322	City-State-Zip:	PLANTATION FL 33322

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: BRIAN JACKSON MANAGER 04/26/2018

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