Electronic Signature of Signing Authorized Person(s) Detail

#### 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000091285

Entity Name: S&S DIAGNOSTIC IMAGING SERVICES LLC

# **Current Principal Place of Business:**

7950 NW 53RD STREET SUITE 337 MIAMI, FL 33166

## **Current Mailing Address:**

7950 NW 53RD STREET SUITE 337 MIAMI, FL 33166 US

## FEI Number: 47-1059846

### Name and Address of Current Registered Agent:

GONZALEZ RODRIGUEZ, SAMUEL 7950 NW 53RD STREET SUITE 337 MIAMI, FL 33166 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	: GONZALEZ RODRIGUEZ, SAMUEL		04/1	4/2015
	Electronic Signature of Registered Agent			Date
Authorized Person(s) Detail :				
Title	MGRM	Title	MGRM	
Name	GONZALEZ RODRIGUEZ, SAMUEL	Name	LOPEZ BERRIOS, SHARON ARLEEN	
Address	7950 NW 53RD STREET SUITE 337	Address	7950 NW 53RD STREET SUITE 337	
City-State-Zip:	MIAMI FL 33166	City-State-Zip:	MIAMI FL 33166	

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: GONZALEZ RODRIGUEZ, SAMUEL

MEMBER

FILED Apr 14, 2015 Secretary of State CC6015501447

Certificate of Status Desired: No

04/14/2015

Date