

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000143291

Entity Name: ADVANTIS PHYSICIAN ALLIANCE, LLC

Current Principal Place of Business:

7230 SW 39 TERR
MIAMI, FL 33155

Current Mailing Address:

7230 SW 39 TERR
MIAMI, FL 33155

FEI Number: 47-1831812

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MUNIZ, EDUARDO R
8302 SW 193 ST
CUTLER BAY, FL 33157 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 MUNIZ, EDUARDO R
Address 8302 SW 193 ST
City-State-Zip: CUTLER BAY FL 33157

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 MUNIZ

COO

02/23/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date