

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000469689

**Entity Name:** OPTIMIZED RADIOLOGY, LLC

**Current Principal Place of Business:**

9 W DESOTO STREET  
PENSACOLA, FL 32501

**Current Mailing Address:**

9 W DESOTO STREET  
PENSACOLA, FL 32501 US

**FEI Number:** 92-1122720

**Certificate of Status Desired:** Yes

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

KRAMER A. LITVAK, P.A.  
40 S. PALAFOX PLACE  
STE 300  
PENSACOLA,, FL 32502 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	Title	MGR
Name	HATCH, NEAL	Name	HATCH, LYNSEY
Address	9 W DESOTO STREET	Address	9 W DESOTO STREET
City-State-Zip:	PENSACOLA FL 32501	City-State-Zip:	PENSACOLA FL 32501

*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:** NEAL HATCH

CEO

01/21/2023

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date