

2013 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M04000000448

Entity Name: UROLOGY SPECIALISTS, LLC

Current Principal Place of Business:

2140 WEST 68 STREET
SUITE 200
HIALEAH, FL 33016

Current Mailing Address:

2140 WEST 68 STREET
SUITE 200
HIALEAH, FL 33016 US

FEI Number: 20-0646908

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ALMEYDA, YOLANDA
2140 WEST 68TH STREET
SUITE 200
HIALEAH, FL 33016 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 OWNER AND MANAGER
Name SOUTH FLORIDA MEDICINE, LLC
Address 3343 STATE ROAD 7
City-State-Zip: WELLINGTON FL 33449

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: YOLANDA ALMEYDA

REGISTERED AGENT

05/28/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date