

2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M15000005649

Entity Name: SOUTH FLORIDA INTEGRATED KIDNEY CARE, LLC**Current Principal Place of Business:**JLD/SECGOVFIN, 2000 16TH STREET
DENVER, CO 80202**Current Mailing Address:**JLD/SEVGOVFIN, 601 HAWAII STREET
EL SEGUNDO, CA 90245 US**FEI Number:** 47-4574300**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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 MEMBER
Name TOTAL RENAL CARE, INC
Address JLD/SECGOVFIN, 2000 16TH STREET
City-State-Zip: DENVER CO 80202

Title MEMBER
Name KAYLIN , MARK MD
Address JLD/SECGOVFIN, 2000 16TH STREET
City-State-Zip: DENVER CO 80202

Title MEMBER
Name COASTAL NEPHROLOGY &
HYPERTENSION CENTER, P.A.
Address JLD/SECGOVFIN, 2000 16TH STREET
City-State-Zip: DENVER CO 80202

Title MEMBER
Name TOWNSEND DIALYSIS, LLC
Address JLD/SECGOVFIN, 2000 16TH STREET
City-State-Zip: DENVER CO 80202

Title MEMBER
Name RENAL ELECTROLYTE AND
HYPERTENSION CONSULTANTS
Address JLD/SECGOVFIN, 2000 16TH STREET
City-State-Zip: DENVER CO 80202

Title MEMBER
Name NEPHROLOGY ASSOCIATES OF
SOUTH BROWARD, P.A.
Address JLD/SECGOVFIN, 2000 16TH STREET
City-State-Zip: DENVER CO 80202

Title MEMBER
Name SANDLER , RICHARD S MD
Address JLD/SECGOVFIN, 2000 16TH STREET
City-State-Zip: DENVER CO 80202

Title MEMBER
Name EAST FT. LAUDERDALE, LLC
Address JLD/SECGOVFIN, 2000 16TH STREET
City-State-Zip: DENVER CO 80202

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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: ARTURO SIDA**AUTHORIZED
REPRESENTATIVE**

04/16/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued :

Title MEMBER
Name SANDS DIALYSIS, LLC
Address JLD/SECGOVFIN, 2000 16TH STREET
City-State-Zip: DENVER CO 80202

Title AUTHORIZED REPRESENTATIVE
Name SIDA, ARTURO
Address JLD/SECGOVFIN, 2000 16TH STREET
City-State-Zip: DENVER CO 80202

Title MEMBER
Name OKANOGAN DIALYSIS, LLC
Address JLD/SECGOVFIN, 2000 16TH STREET
City-State-Zip: DENVER CO 80202