# 2019 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

#### DOCUMENT# M1600000034

#### Entity Name: NEW MEDISCAN II, LLC

## **Current Principal Place of Business:**

21820 BURBANK BLVD. SUITE 310 WOODLAND HILLS, CA 91367

# **Current Mailing Address:**

5201 CONGRESS AVENUE SUITE 100 B BOCA RATON, FL 33487 US

# FEI Number: 20-3986580

### Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 US FILED Mar 25, 2019 Secretary of State 8216407818CC

Certificate of Status Desired: No

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

# Authorized Person(s) Detail :

	Title	AUTHORIZED MEMBER	Title	EXECUTIVE VICE PRESIDENT
	Name	CROSS COUNTRY STAFFING, INC.	Name	CLARK, KEVIN
	Address	6551 PARK OF COMMERCE BLVD	Address	5201 CONGRESS AVENUE SUITE 100 B
	City-State-Zip:	BOCA RATON FL 33487	City-State-Zip:	
	Title	VP	Title Name	VP
	Name	ZAHAROFF, MARISA		BURNS, WILLIAM J.
	Address	5201 CONGRESS AVENUE SUITE 100 B	Address	5201 CONGRESS AVENUE SUITE 100 B
	City-State-Zip:	BOCA RATON FL 33487	City-State-Zip:	
	Title	SECRETARY	Title	ASSISTANT CONTROLLER
	Name	BALL, SUSAN E.	Name	PIZZI, CHRISTOPHER
	Address	5201 CONGRESS AVENUE SUITE 100 B	Address City-State-Zip:	5201 CONGRESS AVENUE SUITE 100 B
	City-State-Zip:	BOCA RATON FL 33487		
	Title	ASSISTANT CONTROLLER		
	Name	POPKIN, GREGORY		
	Address	5201 CONGRESS AVENUE SUITE 100 B		

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: SUSAN E. BALL

City-State-Zip: BOCA RATON FL 33487

SECRETARY

Date

Electronic Signature of Signing Authorized Person(s) Detail