

**2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M20000008061

**Entity Name:** VIVAMAS MEDICAL CENTER - KENDALL, LLC

**Current Principal Place of Business:**

8601/8615 SW 124TH AVE  
MIAMI, FL 33183

**Current Mailing Address:**

5775 BLUE LAGOON DRIVE, SUITE 450  
MIAMI, FL 33126 US

**FEI Number:** 85-2906452

**Certificate of Status Desired:** No

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

CT CORPORATION SYSTEM  
1200 S PINE ISLAND RD  
PLANTATION, FL 33324 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           MANAGING MEMBER  
Name           VIVAMAS DELIVERY NETWORK, LLC  
Address        8601/8615 SW 124TH AVE  
City-State-Zip: MIAMI FL 33183

Title           PRESIDENT  
Name           SHUTZEN, RONALD  
Address        8601/8615 SW 124TH AVE  
City-State-Zip: MIAMI FL 33183

Title           CFO  
Name           PANIAGUA, ARNIE  
Address        8601/8615 SW 124TH AVE  
City-State-Zip: MIAMI FL 33183

Title           COO  
Name           MAZZORANA, TONY  
Address        8601/8615 SW 124TH AVE  
City-State-Zip: MIAMI FL 33183

Title           GENERAL COUNSEL, SECRETARY  
Name           PRIZANT, LESLIE  
Address        8601/8615 SW 124TH AVE  
City-State-Zip: MIAMI FL 33183

Title           VP  
Name           MALTON, DOUGLAS  
Address        8601/8615 SW 124TH AVE  
City-State-Zip: MIAMI FL 33183

*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:** VIVAMAS DELIVERY NETWORK, LLC

**SOLE MEMBER**

**03/29/2022**

Electronic Signature of Signing Authorized Person(s) Detail

Date