

2021 FOREIGN LIMITED LIABILITY COMPANY AMENDED 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:

44 S BROADWAY
STE 100
WHITE PLAINS, NY 10601 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 9000 NW 15TH ST
 UNITS 6 & 7
City-State-Zip: DORAL FL 33172

Title PRESIDENT
Name SHUTZEN, RONALD
Address 44 S BROADWAY
 STE 100
City-State-Zip: WHITE PLAINS NY 10601

Title CFO
Name PANIAGUA, ARNIE
Address 44 S BROADWAY
 STE 100
City-State-Zip: WHITE PLAINS NY 10601

Title COO
Name MAZZORANA, TONY
Address 44 S BROADWAY
 STE 100
City-State-Zip: WHITE PLAINS NY 10601

Title GENERAL COUNSEL, SECRETARY
Name PRIZANT, LESLIE
Address 44 S BROADWAY
 STE 100
City-State-Zip: WHITE PLAINS NY 10601

Title VP
Name MALTON, DOUG
Address 44 S BROADWAY
 STE 100
City-State-Zip: WHITE PLAINS NY 10601

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: LESLIE PRIZANT

GENERAL COUNSEL

09/13/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date