

2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000115630

**FILED
Jan 30, 2012
Secretary of State**

Entity Name: MOUNT SINAI INTENSIVISTS, LLC

Current Principal Place of Business:

4300 ALTON ROAD
WARNER BLDG - ADMINISTRATION
MIAMI BEACH, FL 33140 US

New Principal Place of Business:

Current Mailing Address:

4300 ALTON ROAD
WARNER BLDG - ADMINISTRATION
MIAMI BEACH, FL 33140 US

New Mailing Address:

FEI Number: 26-3932464 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

FRIEDLAND, PRISCILLA
4300 ALTON ROAD - ADMINISTRATION
MIAMI BEACH, FL 33140 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: MOUNT SINAI MEDICAL CENTER OF FLORIDA, INC
Address: 4300 ALTON ROAD
City-St-Zip: MIAMI BEACH, FL 33140 US

I hereby certify that the information indicated on this 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.

SIGNATURE: MOUNT SINAI MEDICAL CENTER OF FLORIDA, INC MGRM 01/30/2012

_____ Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date