

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L00000000194

Entity Name: DOCTORS IMAGING GROUP, LLC

Current Principal Place of Business:

6716 NW 11TH PLACE
GAINESVILLE, FL 32605

Current Mailing Address:

1034 NW 57TH STREET
GAINESVILLE, FL 32605

FEI Number: 59-3618240

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KIM, JONG H
1034 NW 57TH STREET
GAINESVILLE, FL 32605 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 AUTHORIZED MEMBER
Name KIM, JONG H
Address 1034 NW 57TH STREET
City-State-Zip: GAINESVILLE FL 32605

Title AUTHORIZED MEMBER
Name WILLIAMS, WILLIE F
Address 1034 NW 57TH STREET
City-State-Zip: GAINESVILLE FL 32605

Title A, AUTHORIZED MEMBER
Name MARK, BAKER A
Address 1034 NW 57TH STREET
City-State-Zip: GAINESVILLE FL 32605

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: WILLIE F WILLIAMS

AUTHORIZED MEMBER

04/14/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date