**2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

**FILED**
**Jan 23, 2014**
**Secretary of State**
**CC5710748139**

DOCUMENT# L04000007686

**Entity Name:** RCDOC, LLC

**Current Principal Place of Business:**

333 4TH AVENUE NORTH
JACKSONVILLE BEACH, FL 32250

**Current Mailing Address:**

333 4TH AVENUE NORTH
JACKSONVILLE BEACH, FL 32250

**FEI Number: 20-0676463**

**Certificate of Status Desired:** No

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

COOPER, REBECCA MD, JD
333 4TH AVENUE NORTH
JACKSONVILLE BEACH, FL 32250 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 | MGR |
| Name | COOPER, REBECCA MD |
| Address | 2313 BEACH COMBER TRAIL |
| City-State-Zip: | ATLANTIC BEACH FL 32233 |

*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: REBECCA COOPER, M.D. OWNER 01/23/2014

Electronic Signature of Signing Authorized Person(s) Detail — Date