2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
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Secretary of State
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Entity Name: FLEMING ISLAND MEDICAL PLAZA II, LLC

Current Principal Place of Business:

1689 EAGLE HARBOR PARKWAY
A
ORANGE PARK, FL 32003

Current Mailing Address:

1689 EAGLE HARBOR PARKWAY
A
ORANGE PARK, FL 32003

FEI Number: 76-0789301

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ABRAHAM, DAVID T ESQ.
ST JOHN LAW GROUP
104 SEA GROVE MAIN STREET
ST AUGUSTINE, FL 32080 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: DAVID T ABRAHAM, ESQ. 03/08/2016

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MANAGING MEMBER
Name	ASHCHI, MAJDI DR
Address	1689 EAGLE HARBOR PARKWAY EAST SUITE A
City-State-Zip:	ORANGE PARK FL 32003

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: MAJDI ASHCHI DO MANAGING MEMBER 03/08/2016

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