2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
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Secretary of State
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Entity Name: NEPHROLOGY MANAGEMENT GROUP, L.L.C.

Current Principal Place of Business:

9193 SW 72 STREET
SUITE 200
MIAMI, FL 33173

Current Mailing Address:

9193 SW 72 STREET
SUITE 200
MIAMI, FL 33173

FEI Number: 20-3105850

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SACHER, CHARLES P
2655 LEJEUNE ROAD STE 1101
CORAL GABLES, FL 33134 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	Title	MGR
Name	PELLEGRINI, EDGARDO LM.D.	Name	BUSSE, JORGE M.D.
Address	9193 SW 72 STREET #200	Address	9193 SW 72 STREET #200
City-State-Zip:	MIAMI FL 33173	City-State-Zip:	MIAMI FL 33173
Title	MGR	Title	MGR
Name	BARRETO, GASPAR AM.D.	Name	GOMEZ, EMILIO JM.D.
Address	9193 SW 72 STREET #200	Address	9193 SW 72 STREET #200
City-State-Zip:	MIAMI FL 33173	City-State-Zip:	MIAMI FL 33173
Title	MGR		
Name	TRESPALACIOS, FERNANDO CM.D.		
Address	9193 SW. 72 STREET #200		
City-State-Zip:	MIAMI FL 33173		

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: EDGARDO L. PELLEGRINI M.D. MANAGER 02/01/2013

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