2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 18, 2017
Secretary of State
CC5291882366

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Entity Name: FORT MYERS ENDOSCOPY CENTER, LLC

Current Principal Place of Business:

5050 MASON CORBIN COURT
FORT MYERS, FL 33907

Current Mailing Address:

PO BOX 07430
FORT MYERS, FL 33919

FEI Number: 80-0149158

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHAVAKULA, SURESH
5050 MASON CORBIN COURT
FORT MYERS, FL 33907 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	CHAVAKULA, SURESH
Address	5050 MASON CORBIN COURT
City-State-Zip:	FT. MYERS FL 33907

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: SURESH CHAVAKULA MGR 01/18/2017

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