2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 18, 2015
Secretary of State
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Entity Name: FRONTIER SPINE AND HEALTH CARE, LLC

Current Principal Place of Business:

10661 SW 88 ST STE 116
MIAMI, FL 33176

Current Mailing Address:

10661 SW 88 ST STE 116
MIAMI, FL 33176

FEI Number: 27-0675832

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PAUCAR ZAMORA & HERNANDEZ PLLC
5825 SUNSET DRIVE
SUITE 204
SOUTH MIAMI, FL 33143 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	TOLMOS, RAYMOND G
Address	10040 SW 111 ST
City-State-Zip:	MIAMI FL 33176

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: RAYMOND TOLMOS MANAGER 03/18/2015

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