

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000087491

Entity Name: HELIOS PATHOLOGY, LLC

Current Principal Place of Business:

3501 JOHNSON STREET
RM 2-281M
HOLLYWOOD, FL 33021

Current Mailing Address:

4700 SHERIDAN STREET
SUITE J
HOLLYWOOD, FL 33021 US

FEI Number: 27-1918630

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

GRAY ROBINSON
401 E JACKSON STREET
TAMPA, FL 33602 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 CEO
Name MALEK, PAUL AMD
Address 3501 JOHNSON STREET
City-State-Zip: HOLLYWOOD FL 33021

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: PAUL ALLEN MALEK, MD

CEO

01/15/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date