

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000107155

**Entity Name:** MIAMI GARDENS MEDICAL, P.L.

**Current Principal Place of Business:**

260 NW 183RD STREET  
MIAMI GARDENS, FL 33317

**Current Mailing Address:**

12805 SW 47TH STREET  
MIRAMAR, FL 33027 US

**FEI Number:** 27-3695775

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

CLARKE, DAYNA J. DR.  
260 NW 183RD STREET  
MIAMI GARDENS, FL 33317 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:** DAYNA J. CLARKE, M.D.

04/27/2015

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title            PRES  
Name            CLARKE, DAYNA J. DR.  
Address        260 NW 183 STREET  
City-State-Zip: MIAMI GARDENS FL 33169

*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:** DAYNA CLARKE

PRESIDENT/OWNER

04/27/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date