

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L10000121669

**FILED**  
**Mar 10, 2016**  
**Secretary of State**  
**CC5470461274**

**Entity Name:** FLORIDA MSO HOLDINGS, LLC

**Current Principal Place of Business:**

300 S. PINE ISLAND ROAD  
SUITE 238  
PLANTATION, FL 33324

**Current Mailing Address:**

300 S. PINE ISLAND ROAD  
SUITE 238  
PLANTATION, FL 33324

**FEI Number:** 24-4115676

**Certificate of Status Desired:** No

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

BAYLESS, THOMAS R  
300 PINE ISLAND ROAD  
SUITE 238  
PLANTATION, FL 33324 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 BRETON, CRISTIAN  
Address 300 S. PINE ISLAND ROAD, SUITE 238  
City-State-Zip: PLANTATION FL 33324

Title MGR  
Name FUTURE HEALTH, INC.  
Address 300 S. PINE ISLAND ROAD, SUITE 238  
City-State-Zip: PLANTATION FL 33324

Title MGR  
Name MELLA, JUAN  
Address 300 S. PINE ISLAND ROAD, SUITE 238  
City-State-Zip: PLANTATION FL 33324

Title MGR  
Name SOBRADO, JAVIER  
Address 300 S. PINE ISLAND ROAD, SUITE 238  
City-State-Zip: PLANTATION FL 33324

Title MGR  
Name VITIELLO, MARCO  
Address 300 S. PINE ISLAND ROAD, SUITE 238  
City-State-Zip: PLANTATION FL 33324

*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:** THOMAS R BAYLESS

**MGR**

**03/10/2016**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date