

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000122474

Entity Name: RMA OF LAKE WORTH, LLC

Current Principal Place of Business:

6432 LAKE WORTH ROAD
LAKE WORTH, FL 33463

Current Mailing Address:

7800 W.OAKLAND PARK
SUITE E-214
SUNRISE, FL 33351 US

FEI Number: 27-4058998

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KLEIN, BRENT D
3850 BIRD ROAD
SUITE 602
MIAMI, FL 33146 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: BRENT D KLEIN

04/30/2014

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGING MEMBER
Name RMA CLINICS,LLC
Address 7800 W.OAKLAND PARK
 SUITE E-214
City-State-Zip: SUNRISE FL 33351

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: RMA CLINICS LLC

MANAGING MEMBER

04/30/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date