2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 31, 2015
Secretary of State
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Entity Name: SHAIKH INTERNAL MEDICINE, LLC

Current Principal Place of Business:

2504 ACORN STREET
SUITE A
FORT PIERCE, FL 34947

Current Mailing Address:

2504 ACORN STREET
SUITE A
FORT PIERCE, FL 34947

FEI Number: 65-0810263

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SHAIKH, LIAQUDDIN M.D.
2504 ACORN STREET
SUITE A
FORT PIERCE, FL 34947 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	SHAIKH, LIAQUDDIN M.D.
Address	2504 ACORN STREET, SUITE A
City-State-Zip:	FORT PIERCE FL 34947

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: LIAQUDDIN SHAIKH,M.D. MANAGER 03/31/2015

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