2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 28, 2015
Secretary of State
CC0437518896

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Entity Name: HEALTHCARE PARTNERS SOUTH FLORIDA, LLC

Current Principal Place of Business:

10051 5TH STREET
SUITE 200
ST. PETERSBURG, FL 33702

Current Mailing Address:

601 HAWAII STREET
EL SEGUNDO, CA 90245 US

FEI Number: 45-3462809

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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	MEMBER
Name	HEALTHCARE PARTNERS, LLC
Address	19191 SOUTH VERMONT, STE 200
City-State-Zip:	TORRANCE CA 90502

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: ARTURO SIDA AUTHORIZED PERSON 04/28/2015

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