## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000111701

Entity Name: DAVITA MEDICAL GROUP SOUTH FLORIDA, LLC

IIII Name. DAVITA MEDICAL GROUP 300 ITI FLORIDA

## **Current Principal Place of Business:**

JLD/SECGOVFIN 2000 16TH STREET DENVER, CO 80202

## **Current Mailing Address:**

JLD/SECGOVFIN 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

FILED Mar 15, 2019

**Secretary of State** 

1982767009CC

Authorized Person(s) Detail:

Title MEMBER Title MGR

 Name
 DAVITA MEDICAL MANAGEMENT, LLC
 Name
 MELLO, JOSEPH C

 Address
 JLD/SECGOVFIN
 Address
 JLD/SECGOVFIN

601 HAWAII STREET

DENVER CO 80202

City-State-Zip: DENVER CO 80202 City-State-Zip: EL SEGUNDO CA 90245

Title MGR Title MANAGER

Name RECHTIN, JAMES A Name CHUANG, CHAN-CHOU M.D.

Address JLD/SECGOVFIN Address JLD/SECGOVFIN

2000 16TH STREET 2000 16TH STREET

City-State-Zip:

Title SECRETARY

City-State-Zip:

Name CALDWELL, SAMANTHA A.

Address JLD/SECGOVFIN

**2000 16TH STREET** 

DENVER CO 80202

2000 16TH STREET

City-State-Zip: DENVER CO 80202

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: SAMANTHA A. CALDWELL

**SECRETARY** 

03/15/2019