2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000150478

Entity Name: INTELLIRAD IMAGING, LLC

Current Principal Place of Business:

1001 BRICKELL BAY DRIVE, SUITE 2650

MIAMI, FL 33131

Current Mailing Address:

PO BOX 330009 MIAMI. FL 33131 US

FEI Number: 46-1485841 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KAUFMAN, DANA M 1001 BRICKELL BAY DRIVE 2650 MIAMI, FL 33131 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 Feb 09, 2020

Secretary of State

2080289285CC

Authorized Person(s) Detail:

2650

2650

Title PRESIDENT Title TREASURER

Name FRANCA, EDUARDO Name JOSEPH, RONALD C

Address 1001 BRICKELL BAY DRIVE Address 1001 BRICKELL BAY DRIVE

2650 2650

City-State-Zip: MIAMI FL 33131 City-State-Zip: MIAMI FL 33131

Title VP Title SECRETARY

Name MANI, NISHA S Name KOSOVE, JASON

Address 1001 BRICKELL BAY DRIVE Address 1001 BRICKELL BAY DRIVE, SUITE

2650

City-State-Zip: MIAMI FL 33131 City-State-Zip: MIAMI FL 33131

Title MANAGER Title MANAGER

Name RODRIGUEZ, JOSE A Name ENRIZO, ORLANDO

Address 1001 BRICKELL BAY DRIVE, SUITE Address 1001 BRICKELL BAY DRIVE, SUITE

2650

City-State-Zip: MIAMI FL 33131 City-State-Zip: MIAMI FL 33131

Title MANAGER Title MGR

Name CACERES, CARLOS Name FOURZALI, ROBERTO

Address 1001 BRICKELL BAY DRIVE, SUITE Address 1001 BRICKELL BAY DR #2650

2650

City-State-Zip: MIAMI FL 33131

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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: RONALD C. JOSEPH TREASURER 02/09/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date

Authorized Person(s) Detail Continued:

Title MANAGER

Name BAIGORRI, BRIAN

Address 1001 BRICKELL BAY DRIVE, SUITE 2650

City-State-Zip: MIAMI FL 33131

Title MANAGER

Name DEMELO, RYAN

Address 1001 BRICKELL BAY DRIVE, SUITE 2650

City-State-Zip: MIAMI FL 33131

Title MANAGER

Name MCKEON, BRETT

Address 1001 BRICKELL BAY DRIVE, SUITE

2650

City-State-Zip: MIAMI FL 33131