2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 14, 2019
Secretary of State
7541751933CC

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Entity Name: RADIOLOGY CEU PROVIDERS, LLC

Current Principal Place of Business:

12620 BEACH BLVD #183
JACKSONVILLE, FL 32246

Current Mailing Address:

12620 BEACH BLVD SUITE 3 #183
JACKSONVILLE, FL 32246

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WOOD, JOE
12620 BEACH BLVD SUITE 3
NUMBER 183
JACKSONVILLE, FL 32246 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	AUTHORIZED MEMBER
Name	WOOD, JOE D
Address	12620 BEACH BLVD SUITE 3 NUMBER 183
City-State-Zip:	JACKSONVILLE FL 32246

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: JOE WOOD OWNER 02/14/2019

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