2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Feb 16, 2016
Secretary of State
CC8975975779

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Entity Name: DORAL HEALTHCARE, L.L.C.

Current Principal Place of Business:

9851 NW 58TH STREET SUITE 109
DORAL, FL 33178-2717

Current Mailing Address:

9851 NW 58TH STREET SUITE 109
DORAL, FL 33178-2717

FEI Number: 32-0349690

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GONZALEZ, WILFREDO MD
9851 NW 58TH STREET SUITE 109
DORAL, FL 33178-2717 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	MEM
Name	PRIMEHEALTH PHYSICIANS, LLC
Address	149680 SW 8TH STREET SUITE 211
City-State-Zip:	MIAMI FL 33184-3138

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: WILFREDO GONZALEZ MEDICAL DOCTOR 02/16/2016

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