2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 18, 2017
Secretary of State
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Entity Name: PHYSICIAN PARTNERS HOSPITALIST SERVICES, LLC

Current Principal Place of Business:

601 S HARBOUR ISLAND BVLD
SUITE 213A
TAMPA, FL 33602

Current Mailing Address:

601 S HARBOUR ISLAND BVLD
SUITE 213A
TAMPA, FL 33602 US

FEI Number: 47-3963821

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PAGIDIPATI, SRUJANI
601 S HARBOUR ISLAND BVLD
SUITE 213A
TAMPA, FL 33602 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: SRUJANI PAGIDIPATI 03/18/2017

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	PAGIDIPATI, SIDD	Name	PAGIDIPATI, RAHUL
Address	601 S HARBOUR ISLAND BVLD SUITE 213A	Address	601 S HARBOUR ISLAND BVLD SUITE 213A
City-State-Zip:	TAMPA FL 33602	City-State-Zip:	TAMPA FL 33602

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: SIDD PAGIDIPATI MGR 03/18/2017

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