2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 21, 2016
Secretary of State
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Entity Name: NEPHROLOGY SERVICES OF JUPITER MEDICAL SPECIALISTS, LLC

Current Principal Place of Business:

1613 N. HARRISON PARKWAY
STE. 200
SUNRISE, FL 33323

Current Mailing Address:

1613 N. HARRISON PARKWAY
STE. 200
SUNRISE, FL 33323 US

FEI Number: 32-0471662

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MARCUS, JILLIAN
1613 N. HARRISON PARKWAY
STE. 200
SUNRISE, FL 33323 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	MGR	Title	MGR
Name	WEINSTEIN, CHRISTINE	Name	COURIS, JOHN
Address	1613 N. HARRISON PARKWAY	Address	1210 SOUTH OLD DIXIE HIGHWAY
City-State-Zip:	SUNRISE FL 33323	City-State-Zip:	JUPITER FL 33458
Title	MGR	Title	MGR
Name	DYTRYCH, MARTIN A	Name	COWARD, ROBERT
Address	1210 SOUTH OLD DIXIE HWY	Address	1613 N. HARRISON PARKWAY
City-State-Zip:	JUPITER FL 33458	City-State-Zip:	SUNRISE FL 33323

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: CHRISTINE WEINSTEIN MANAGER 04/21/2016

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