

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000058702

**Entity Name:** RADIOLOGY IMAGING SPECIALISTS LLC

**Current Principal Place of Business:**

1714 SW 17TH ST  
300  
OCALA, FL 34471

**Current Mailing Address:**

9827 MEADOW FIELD CIRCLE  
TAMPA, FL 33626 US

**FEI Number:** 81-1981130

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

DESAI, CHINTAN  
9827 MEADOW FIELD CIR  
TAMPA, FL 33626 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:** CHINTAN DESAI

03/06/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name DESAI, CHINTAN  
Address 9827 MEADOW FIELD CIRCLE  
City-State-Zip: TAMPA FL 33626

*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:** CHINTAN DESAI

MGR

03/06/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date