

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000118442

Entity Name: SHAW MEDICAL GROUP LLC

Current Principal Place of Business:

8000 RON BEATTY BLVD
SUITE B-5
MICCO, FL 32976

Current Mailing Address:

PO BOX 991
MELBOURNE, FL 32902 US

FEI Number: 81-3035276

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHAW, PATRICK N
8000 RON BEATTY BLVD
SUITE B-5
MICCO, FL 32976 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
Name SHAW, PATRICK N
Address 8000 RON BEATTY BLVD
SUITE B-5
City-State-Zip: MICCO FL 32976

Title MGR
Name SHAW, CRISTINA E
Address 8000 RON BEATTY BLVD
SUITE B-5
City-State-Zip: MICCO FL 32976

Title MGR
Name SHAW, CARMENCITA E
Address 8000 RON BEATTY BLVD
SUITE B-5
City-State-Zip: MICCO FL 32976

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: PATRICK N SHAW

PRESIDENT

02/11/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date