2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 14, 2018
Secretary of State
CC0386658306

DOCUMENT# L16000148062

Entity Name: TRINITY OAKS FAMILY MEDICINE, LLC

Current Principal Place of Business:

2044 TRINITY OAKS BLVD
SUITE 220
TRINITY, FL 34655

Current Mailing Address:

2044 TRINITY OAKS BLVD
SUITE 220
TRINITY, FL 34655 US

FEI Number: 81-3524142

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FERREIRA, ROBERT
2044 TRINITY OAKS BLVD
SUITE 220
TRINITY, FL 34655 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	FERREIRA, ROBERT	Name	VIEIRA, LEONARDO
Address	10309 ALTRARA WAY	Address	1031 TOSCANO DR
City-State-Zip:	TRINITY FL 34655	City-State-Zip:	TRINITY FL 34655

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: ROBERT FERREIRA — ROBERT J. FERREIRA, M.D. — 01/14/2018

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