

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000227869

Entity Name: GUARDIAN HOSPITALIST, LLC

Current Principal Place of Business:

3157 NORTH UNIVERSITY DRIVE
SUITE 107
HOLLYWOOD, FL 33024

Current Mailing Address:

3157 NORTH UNIVERSITY DRIVE
SUITE 107
HOLLYWOOD, FL 33024 US

FEI Number: 81-5155365

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HARKINS, JOHN
1426 JACKSON ST
SUITE 1800
HOLLYWOOD, FL 33020 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	TOTFALUSI, VICTOR MD	Name	US CARE GROUP, LLC
Address	3157 NORTH UNIVERSITY DRIVE	Address	1426 JACKSON STREET
City-State-Zip:	HOLLYWOOD FL 33024	City-State-Zip:	HOLLYWOOD FL 33030

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: VICTOR TOTFALUSI

MANAGER

02/13/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date