

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000052620

Entity Name: AKUMIN FL, LLC**Current Principal Place of Business:**8300 W. SUNRISE BLVD.
PLANTATION, FL 33322**Current Mailing Address:**8300 W. SUNRISE BLVD.
PLANTATION, FL 33322 US**FEI Number:** 32-0568377**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**LEGALINC CORPORATE SERVICES INC.
5237 SUMMERLIN COMMONS BLVD STE 400
FT MYERS, FL 33907 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 AKUMIN CORP.
Address 8300 W. SUNRISE BLVD.
City-State-Zip: PLANTATION FL 33322

Title CHAIRMAN, CEO
Name ZINE, RIADH
Address 8300 W. SUNRISE BLVD.
City-State-Zip: PLANTATION FL 33322

Title CFO
Name LARKIN, WILLIAM
Address 8300 W. SUNRISE BLVD.
City-State-Zip: PLANTATION FL 33322

Title CORPORATE SECRETARY
Name CAMERON, MATTHEW
Address 8300 W. SUNRISE BLVD.
City-State-Zip: PLANTATION FL 33322

Title ASST. SECRETARY
Name BONICA, GINA M
Address 8300 W. SUNRISE BLVD.
City-State-Zip: PLANTATION FL 33322

Title MANAGER
Name AKUMIN CORP.
Address 8300 W. SUNRISE BLVD.
City-State-Zip: PLANTATION FL 33322

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: MATTHEW CAMERON**CORPORATE
SECRETARY****04/06/2022**

Electronic Signature of Signing Authorized Person(s) Detail

Date