2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 08, 2019
Secretary of State
4956552807CC

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Entity Name: INPATIENT CARE SERVICES, LLC

Current Principal Place of Business:

2800 PONCE DE LEON BLVD
SUITE 1125
CORAL GABLES, FL 33134

Current Mailing Address:

2800 PONCE DE LEON BLVD
SUITE 1125
CORAL GABLES, FL 33134 US

FEI Number: 83-2382877

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SCHERMER, STEVEN
2800 PONCE DE LEON BLVD
SUITE 1125
CORAL GABLES, FL 33134 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	PEREZ-FERNANDEZ, JAVIER
Address	2800 PONCE DE LEON BLVD SUITE 1125
City-State-Zip:	CORAL GABLES FL 33134

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: JAVIER PEREZ-FERNANDEZ MGR 04/08/2019

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