

**2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000096689

**Entity Name:** RADIOLOGY IMAGING LIAISON, LLC

**Current Principal Place of Business:**

19361 SW 69TH STREET  
PEMBROKE PINES, FL 33332

**Current Mailing Address:**

19361 SW 69TH STREET  
PEMBROKE PINES, FL 33332

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

MARTINEZ, DAVID  
19361 SW 69TH STREET  
PEMBROKE PINES, FL 33332 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           MANAGER  
Name           MARTINEZ, DAVID  
Address        19361 SW 69TH STREET  
City-State-Zip: PEMBROKE PINES FL 33332

*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:** DAVID MARTINEZ

MANAGER

04/27/2020

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date