

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L24000169236

Entity Name: CHOICE HOSPITALIST GROUP, LLC

Current Principal Place of Business:

6600 COW PEN ROAD, SUITE 205
MIAMI LAKES, FL 33014

Current Mailing Address:

6600 COW PEN ROAD, SUITE 205
MIAMI LAKES, FL 33014 US

FEI Number: 99-2466367

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CONTRERAS, JOSE J
6600 COW PEN ROAD, SUITE 205
MIAMI LAKES, FL 33014 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 AMBR
Name CONTRERAS, JOSE J
Address 6600 COW PEN ROAD, SUITE 205
City-State-Zip: MIAMI LAKES FL 33014

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: JOSE J CONTRERAS

AMBR

02/03/2025

Electronic Signature of Signing Authorized Person(s) Detail

Date