2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 03, 2018
Secretary of State
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Entity Name: MAXIM PHYSICIAN RESOURCES, LLC

Current Principal Place of Business:

7227 LEE DEFOREST DRIVE
COLUMBIA, MD 21046-3236

Current Mailing Address:

7227 LEE DEFOREST DRIVE
COLUMBIA, MD 21046-3236 US

FEI Number: 51-0580120

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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	Title	PRESIDENT, DIRECTOR
Name	MAXIM HEALTHCARE SERVICES, INC.	Name	BUTZ, WILLIAM
Address	7227 LEE DEFOREST DRIVE	Address	7227 LEE DEFOREST DRIVE
City-State-Zip:	COLUMBIA MD 21046-3236	City-State-Zip:	COLUMBIA MD 21046-3236
Title	VP, SECRETARY	Title	VP, TREASURER
Name	LISA, TONI-JEAN	Name	CARBONE, RAYMOND
Address	7227 LEE DEFOREST DRIVE	Address	7227 LEE DEFOREST DRIVE
City-State-Zip:	COLUMBIA MD 21046-3236	City-State-Zip:	COLUMBIA MD 21046-3236

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: RAYMOND CARBONE VICE PRESIDENT 04/03/2018

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