

**2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M10000001099

**Entity Name:** ARA-NAPLES SOUTH DIALYSIS CENTER LLC

**Current Principal Place of Business:**

500 CUMMINGS CENTER  
SUITE 6550  
BEVERLY, MA 01915

**Current Mailing Address:**

4270 TAMIAMI TRAIL EAST  
NAPLES, FL 34112 US

**FEI Number:** 27-2035849

**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  
Name           MENDEZ, NICK  
Address        500 CUMMINGS CENTER  
                  SUITE 6550  
City-State-Zip: BEVERLY MA 01915

Title           MANAGER  
Name           GADALLAH, MERIT F. M.D.  
Address        500 CUMMINGS CENTER  
                  SUITE 6550  
City-State-Zip: BEVERLY MA 01915

Title           MANAGER  
Name           KAMAL, SYED T.  
Address        500 CUMMINGS CENTER  
                  SUITE 6550  
City-State-Zip: BEVERLY MA 01915

Title           MEMBER  
Name           NEPHROLOGY & HYPERTENSION  
                  SPECIALISTS, INC.  
Address        500 CUMMINGS CENTER  
                  SUITE 6550  
City-State-Zip: BEVERLY MA 01915

Title           MEMBER  
Name           AMERICAN RENAL ASSOCIATES LLC  
Address        500 CUMMINGS CENTER  
                  SUITE 6550  
City-State-Zip: BEVERLY MA 01915

*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:** NICK MENDEZ

**MANAGER**

**02/22/2023**

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

\_\_\_\_\_  
Date