

2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M18000006009

Entity Name: FI LINTON MEDICAL CENTER, LLC

Current Principal Place of Business:

TWO SOUTH BISCAYNE BLVD
SUITE 2000
MIAMI, FL 33131

Current Mailing Address:

TWO SOUTH BISCAYNE BLVD
SUITE 2000
MIAMI, FL 33131 US

FEI Number: 38-4085060

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHOUKROUN, DIDIER
TWO SOUTH BISCAYNE BLVD
SUITE 2000
MIAMI, FL 33131 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	Title	MGR
Name	CHOUKROUN, DIDIER	Name	TIAN, MUXIN
Address	TWO SOUTH BISCAYNE BLVD STE. 2000	Address	TWO SOUTH BISCAYNE BLVD STE. 2000
City-State-Zip:	MIAMI FL 33131	City-State-Zip:	MIAMI FL 33131

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: DIDIER CHOUKROUN

MGR

03/08/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date