

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **AMBULATORY CARE CENTER (ACC) EAST**

1611 N.W. 12th Avenue, in the city of
Miami, FL
in **Miami-Dade County**,
Florida 33136.

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **AMBULATORY CARE CENTER (ACC) WEST**

1611 N.W. 12th Avenue, in the city of
Miami, FL
in **Miami-Dade County**,
Florida 33136.

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **CHRISTINE E. LYNN REHABILITATION CENTER FOR THE MIAMI PROJECT TO CURE PARALYSIS AT UHEALTH/JACKSON MEMORIAL**

1611 N.W. 12th Avenue, in the city of
Miami, FL
in **Miami-Dade County**,
Florida 33136.

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **COLORECTAL AND MINIMALLY INVASIVE SURGERY SPECIALISTS**

9195 Sunset Dr, in the city of
Miami, FL
in **Miami-Dade County**,
Florida 33173.

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **DR. RAFAEL A. PEÑALVER CLINIC**

971 N.W. 2nd Street, in the city of
Miami, FL
in **Miami-Dade County**,
Florida 33128.

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **HOLTZ CHILDREN'S HOSPITAL/THE WOMEN'S HOSPITAL AT JACKSON MEMORIAL**

1611 N.W. 12TH Avenue, in the city of
Miami, FL
in **Miami-Dade County**,
Florida 33136.

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **JACKSON BEHAVIORAL HEALTH HOSPITAL**

1695 N.W. 9TH AVENUE, in the city of
Miami, FL
in **Miami-Dade County**,
Florida 33136.

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **JACKSON COMMUNITY MENTAL HEALTH CENTER**

15055 N.W. 27TH Avenue, in the city of
OPA-LOCKA, FL
in **Miami-Dade County**,
Florida 33054.

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **JACKSON HEART INSTITUTE | CORAL GABLES**

3737 S.W. 8TH ST, in the city of
CORAL GABLES, FL
in **Miami-Dade County**,
Florida 33134.

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **JACKSON HEART INSTITUTE | HEALTH DISTRICT**

1801 N.W. 9TH Avenue, in the city of
Miami, FL
in **Miami-Dade County**,
Florida 33136.

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **JACKSON HEART INSTITUTE | JACKSON SOUTH**

9380 S.W. 150TH ST, in the city of
Miami, FL
in **Miami-Dade County**,
Florida 33176.

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **JACKSON HEART INSTITUTE | NORTH MIAMI**

1802 N.E. 123 ST, in the city of
NORTH MIAMI, FL
in **Miami-Dade County**,
Florida 33181.

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **JACKSON HEART INSTITUTE | HIALEAH**

1490 West 49th Place,, in the city of
HIALEAH, FL
in **Miami-Dade County**,
Florida 33012.

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **JACKSON HEART SURGERY INSTITUTE**

3650 N.W. 82ND Avenue in the city of
DORAL, FL
in **Miami-Dade County,**
Florida 33166.

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **JACKSON MEDICAL GROUP | HEALTH DISTRICT**

1801 N.W. 9TH Avenue, in the city of
MIAMI, FL
in **Miami-Dade County,**
Florida 33136.

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **JACKSON MEDICAL GROUP | JACKSON NORTH**

100 N.W. 170TH ST, in the city of
MIAMI, FL
in **Miami-Dade County,**
Florida 33169.

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **JACKSON MEDICAL GROUP | JACKSON SOUTH**

9380 S.W. 150TH ST, in the city of
MIAMI, FL
in **Miami-Dade County,**
Florida 33176.

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **JACKSON MEDICAL GROUP | JACKSON SOUTH MEDICAL PLAZA**

15155 S.W. 97TH Avenue, in the city of
MIAMI, FL
in **Miami-Dade County,**
Florida 33176.

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **JACKSON MEDICAL GROUP | JACKSON WEST**

2801 N.W. 79TH Avenue, in the city of
DORAL, FL
in **Miami-Dade County**,
Florida 33122.

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **JACKSON MEDICAL GROUP | JACKSON MATERNAL FETAL MEDICINE**

11760 S.W. 40TH ST, in the city of
MIAMI, FL
in **Miami-Dade County**,
Florida 33175.

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **JACKSON MEDICAL GROUP | NORTH MIAMI**

1801 N.E. 123 ST, in the city of
NORTH MIAMI, FL
in **Miami-Dade County**,
Florida 33181.

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **JACKSON MEDICAL GROUP | PLANTATION**

600 PINE ISLAND RD, in the city of
PLANTATION, FL
In **Broward County**,
Florida 33324.

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **JACKSON ORTHOPEDIC CENTER | KENDALL**

7887 N. KENDALL DR, in the city of
Miami, FL
In **Miami-Dade County**,
Florida 33156.

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **JACKSON PEDIATRIC CENTER**

1477 N.W. 8TH Avenue, in the city of
Miami, FL
In **Miami-Dade County**,
Florida 33136.

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **JACKSON PHARMACY | BEHAVIORAL HEALTH**

1695 N.W. 9TH Avenue, in the city of
Miami, FL
In **Miami-Dade County**,
Florida 33136.

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **JACKSON PRESCRIBED PEDIATRIC EXTENDED CARE**

1477 N.W. 8TH Avenue, in the city of
Miami, FL
In **Miami-Dade County**,
Florida 33136.

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **JEFFERSON REAVES, SR. HEALTH CENTER**

1009 N.W. 5TH Avenue, in the city of
Miami, FL
In **Miami-Dade County**,
Florida 33136.

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **JOSE MILTON MEMORIAL HOSPITAL**

2809 N.W. 79TH Avenue, in the city of
DORAL, FL
In **Miami-Dade County**,
Florida 33122.

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **MIAMI BURN CENTER**

RYDER TRAUMA CENTER, 1800 N.W. 10TH Avenue, in the city of
Miami, FL
In **Miami-Dade County**,
Florida 33136.

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **MIAMI TRANSPLANT INSTITUTE DIAGNOSTIC AND TREATMENT CENTER AT PLANTATION**

600 PINE ISLAND RD, in the city of
PLANTATION, FL
In **Broward County**,
Florida 33324.

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **NORTH DADE HEALTH CENTER**

16555 N.W. 25TH Avenue in the city of
Miami Gardens, FL
In **Miami-Dade County**,
Florida 33054.

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **ROSIE LEE WESLEY HEALTH CENTER**

6601 S.W. 62ND Avenue, in the city of
South Miami, FL
In **Miami-Dade County**,
Florida 33143.

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **ROXCY BOLTON RAPE TREATMENT CENTER**

1611 N.W. 12TH Avenue, in the city of
Miami, FL
In **Miami-Dade County**,
Florida 33136.

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **RYDER TRAUMA CENTER | JACKSON MEMORIAL**

1800 N.W. 10TH Avenue, in the city of
Miami, FL
In **Miami-Dade County**,
Florida 33136.

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **RYDER TRAUMA CENTER | JACKSON SOUTH**

9333 S.W. 152ND ST, in the city of
Miami, FL
In **Miami-Dade County**,
Florida 33157.

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **SHRINERS CHILDREN'S ORTHOPEDIC CENTER AT UHEALTH JACKSON CHILDREN'S CARE**

1611 N.W. 12TH Avenue, in the city of
Miami, FL
In **Miami-Dade County**,
Florida 33136.

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **TAYLOR BREAST HEALTH CENTER/ROBERTA ORLEN CHAPLIN DIGITAL BREAST IMAGING CENTER**

1611 N.W. 12TH Avenue, in the city of
Miami, FL
In **Miami-Dade County**,
Florida 33136.

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **UHEALTH JACKSON CHILDREN'S CARE PEDIATRIC CARDIOLOGY - COCONUT GROVE**

3659 S MIAMI Avenue, in the city of
Miami, FL
In **Miami-Dade County**,
Florida 33133.

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **UHEALTH JACKSON CHILDREN'S CARE PEDIATRIC CARDIOLOGY - KENDALL**

8950 N KENDALL DR, in the city of
Miami, FL
In **Miami-Dade County**,
Florida 33176.

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **UHEALTH JACKSON SPECIALTY CARE AT JACKSON SOUTH MEDICAL PLAZA**

15155 S.W. 97TH Avenue, in the city of
Miami, FL
In **Miami-Dade County**,
Florida 33176.

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **UHEALTH JACKSON URGENT CARE | KEYSTONE POINT**

13120 BISCAYNE BLVD, in the city of
Miami, FL
In **Miami-Dade County**,
Florida 33181.

NOTICE UNDER FICTITIOUS NAME

NOTICE IS HEREBY GIVEN that the undersigned, desiring to engage in business under the fictitious name of **JACKSON HEALTH FOUNDATION**

1611 N.W. 12th Avenue, in the city of
Miami, FL
In **Miami-Dade County**,
Florida 33136.