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.

MGR

SIGNATURE: CARLOS A. GUTIERREZ

Electronic Signature of Signing Authorized Person(s) Detail

The SIGNATURE:

Electronic Signature of Registered Agent

Authorized Person(s) Detail :

Title	MGR	Title	MGR
Name	GUTIERREZ, CARLOS A	Name	ORTIZ-GUTIERREZ, PATRICIA
Address	15522 FIORENZA CIR.	Address	15522 FIORENZA CIR.
City-State-Zip:	DELRAY BEACH FL 33446	City-State-Zip:	DELRAY BEACH FL 33446

e above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Flo	orida.

15522 FIORENZA CIRCLE

Name and Address of Current Registered Agent:

GUTIERREZ, CARLOS A 15522 FIORENZA CIR. DELRAY BEACH, FL 33446 US

DOCUMENT# L04000013066

Entity Name: HEALTHCARE BUSINESS CONSULTANTS, LLC

Current Principal Place of Business:

15522 FIORENZA CIRCLE DELRAY BEACH, FL 33446

Current Mailing Address:

DELRAY BEACH. FL 33446

FEI Number: 20-0964493

Certificate of Status Desired: No

08/26/2019 Date

FILED Aug 26, 2019 Secretary of State 7275708858CC

Date