Current Pri 3891 COMMER MIRAMAR, FL				
Current Mai	ling Address:			
	ESSIONAL PARKWAY LE, GA 30507 US			
FEI Number: 20-4717134		Certificate of Status Desired: No		
Name and A	Address of Current Registered Agent:			
RAMBO, BARB 3891 COMMER MIRAMAR, FL	CE PARKWAY			
The above name	d entity submits this statement for the purpose of changing its regis	stered office or regis	tered agent, or both, in the State of Florid	э.
	d entity submits this statement for the purpose of changing its regis	stered office or regis		a.)2/01/2016
		stered office or regis		
SIGNATURE	E: BARBARA RAMBO	stered office or regis		2/01/2016
SIGNATURE	Electronic Signature of Registered Agent	stered office or regis		2/01/2016
SIGNATURE Authorized	BARBARA RAMBO Electronic Signature of Registered Agent Person(s) Detail :		(2/01/2016
SIGNATURE Authorized	E: BARBARA RAMBO Electronic Signature of Registered Agent Person(s) Detail : PRES	Title	CFO	02/01/2016 Date
SIGNATURE Authorized Title Name	EIECTRONIC Signature of Registered Agent Person(s) Detail : PRES BURGESS, ROGER	Title Name	CFO RAMBO, BARBARA CFO 1267 PROFESSIONAL PARKWAY	02/01/2016 Date
SIGNATURE Authorized Title Name Address	E: BARBARA RAMBO Electronic Signature of Registered Agent Person(s) Detail : PRES BURGESS, ROGER 3891 COMMERCE PARKWAY	Title Name Address	CFO RAMBO, BARBARA CFO 1267 PROFESSIONAL PARKWAY	02/01/2016 Date
SIGNATURE Authorized Title Name Address City-State-Zip:	E BARBARA RAMBO Electronic Signature of Registered Agent Person(s) Detail : PRES BURGESS, ROGER 3891 COMMERCE PARKWAY MIRAMAR FL 33025	Title Name Address	CFO RAMBO, BARBARA CFO 1267 PROFESSIONAL PARKWAY	02/01/2016 Date
SIGNATURE Authorized Title Name Address City-State-Zip: Title	E BARBARA RAMBO Electronic Signature of Registered Agent Person(s) Detail : PRES BURGESS, ROGER 3891 COMMERCE PARKWAY MIRAMAR FL 33025 SEC	Title Name Address	CFO RAMBO, BARBARA CFO 1267 PROFESSIONAL PARKWAY	02/01/2016 Date

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: BARBARA RAMBO

CFO

Electronic Signature of Signing Authorized Person(s) Detail

DOCUMENT# L04000021925

Entity Name: HEALTHCARE SPECIALTY TRANSACTION SERVICES, LLC

Current Principal Place of Business:

FILED Feb 01, 2016 Secretary of State CC8454522371