

2014 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000010348

Entity Name: MEDCODING ASSOCIATES, LLC

Current Principal Place of Business:

7750 NW 197 STREET
HIALEAH, FL 33015

Current Mailing Address:

PO BOX 126487
HIALEAH, FL 33012

FEI Number: 26-4313395

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MELENDEZ, DARLING E
7750 NW 197 STREET
HIALEAH, FL 33015 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	MGRM
Name	MELENDEZ, DARLING E	Name	ROMAN, JUAN MJR.
Address	8445 NW 140 TERRACE	Address	7750 NW 197 STREET
City-State-Zip:	MIAMI LAKE FL 33016	City-State-Zip:	HIALEAH FL 33015

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: JUAN M. ROMAN JR.

MANGER

01/10/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date