

**2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L09000010348

**Entity Name:** MEDCODING ASSOCIATES, LLC

**Current Principal Place of Business:**

8445 NW 140 TERRACE  
MIAMI LAKES, FL 33016

**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  
8445 NW 140 TERRACE  
MIAMI LAKES, FL 33016 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	8445 NW 140 TERRACE
City-State-Zip:	MIAMI LAKE FL 33016	City-State-Zip:	MIAMI LAKES FL 33016

*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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: JUAN M. ROMAN, JR.**

**MANAGER**

**02/03/2013**

Electronic Signature of Signing Authorized Person(s) Detail

Date