

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000080606

**Entity Name:** MEDICAL FUNDING CONSULTANTS, LLC

**Current Principal Place of Business:**

8815 CONROY WINDERMERE RD  
SUITE 171  
ORLANDO, FL 32835

**Current Mailing Address:**

8815 CONROY WINDERMERE RD  
SUITE 171  
ORLANDO, FL 32835 FL

**FEI Number:** 45-2903428

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

BARBER, WESLEY B  
8815 CONROY WINDERMERE RD #171  
ORLANDO, FL 32835 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:** WESLEY B. BARBER

03/04/2016

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MEMBER	Title	MEMBER
Name	BARBER, WESLEY B	Name	RODRIGUEZ, IHAN
Address	8815 CONROY WINDERMERE #171	Address	8815 CONROY WINDERMERE RD SUITE 171
City-State-Zip:	ORLANDO FL 32835	City-State-Zip:	ORLANDO FL 32835

*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:** IHAN RODRIGUEZ

MGMBR

03/04/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date