2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L12000033114

Entity Name: TIGERTAIL EMERGENCY PHYSICIANS, LLC

Current Principal Place of Business:

6200 S SYRACUSE WAY STE 200 GREENWOOD VILLAGE. CO 80111

Current Mailing Address:

6200 S. SYRACUSE WAY, SUITE 200 GREENWOOD VILLAGE, CO 80111

FEI Number: NOT APPLICABLE Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301-2525 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

FILED Apr 22, 2015

Secretary of State

CC1315643746

Authorized Person(s) Detail:

Title MGR Title **SECRETARY** BYRNE, MD, GREGORY J Name WILSON, CRAIG A Name

6200 S. SYRACUSE WAY, SUITE 200 Address 6200 S SYRACUSE WAY STE 200 Address City-State-Zip: GREENWOOD VILLAGE CO 80111 City-State-Zip: GREENWOOD VILLAGE CO 80111

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: CRAIG A WILSON **SECRETARY** Electronic Signature of Signing Authorized Person(s) Detail

04/22/2015

Date