

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000192349

Entity Name: COMPASS MEDICAL SERVICES, LLC

Current Principal Place of Business:

1065 NE 125TH STREET
SUITE 409
NORTH MIAMI, FL 33161

Current Mailing Address:

1065 NE 125TH STREET
SUITE 409
NORTH MIAMI, FL 33161

FEI Number: 47-2519512

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

CHOY, ANDREW T
1065 NE 125TH STREET
SUITE 409
NORTH MIAMI, FL 33161 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
Name SEGAL, SCOTT D
Address 1065 NE 125TH STREET
City-State-Zip: NORTH MIAMI FL 33161

Title AMBR
Name HURWIT, HANDRE
Address 1065 NE 125TH STREET
City-State-Zip: NORTH MIAMI FL 33161

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: SCOTT SEGAL

CEO

04/13/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date