## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000094566

Entity Name: TREMENDO HEALTHCARE CONSULTING GROUP, LLC

FILED
Jan 05, 2019
Secretary of State
7154198932CC

## **Current Principal Place of Business:**

8931 WINGED FOOT DRIVE TALLAHASSEE, FL 32312

## **Current Mailing Address:**

8931 WINGED FOOT DRIVE TALLAHASSEE. FL 32312 US

FEI Number: 47-4170631 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

TREMENDO HEALTHCARE CONSULTING GROUP, LLC 8931 WINGED FOOT DRIVE TALLAHASSEE, FL 32312 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: DANNY ESTUPINAN 01/05/2019

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail:

Title MGR Title MGR

Name ESTUPINAN, DANNY Name ACOSTA, YANELY

Address 8931 WINGED FOOT DRIVE Address 8931 WINGED FOOT DRIVE

City-State-Zip: TALLAHASSEE FL 32312 City-State-Zip: TALLAHASSEE FL 32312

Title AMBR

Name ESTUPINAN, DANNY

Address 8931 WINGED FOOT DRIVE City-State-Zip: TALLAHASSEE FL 32312

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: DANNY ESTUPINAN

CEO/PRESIDENT, AMBR/MGR 01/05/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date