

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L15000094566

**Entity Name:** TREMENDO HEALTHCARE CONSULTING GROUP, LLC

**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:** Yes

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

WILLIAMS AND COLEMAN, P.A.  
701 E TENNESSEE ST  
TALLAHASSEE, FL 32308 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:** JAMI COLEMAN

01/31/2021

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

*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

MGR

01/31/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date