

2017 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L15000094566

**FILED
Jan 28, 2017
Secretary of State
CR9436420235**

Entity Name: TREMENDO HEALTHCARE CONSULTING GROUP, LLC

Current Principal Place of Business:

5956 PAVILION DR.
JACKSONVILLE, FL 32258

Current Mailing Address:

5956 PAVILION DR.
JACKSONVILLE, FL 32258 US

FEI Number: 47-4170631

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

TREMENDO HEALTHCARE CONSULTING GROUP, LLC
5956 PAVILION DR.
JACKSONVILLE, FL 32258 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

01/28/2017

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name ACOSTA, YANELY
Address 5956 PAVILION DR.
City-State-Zip: JACKSONVILLE FL 32258

Title MGR
Name ESTUPINAN, DANNY
Address 5956 PAVILION DR.
City-State-Zip: JACKSONVILLE FL 32258

Title AMBR
Name ESTUPINAN, DANNY
Address 5956 PAVILION DR.
City-State-Zip: JACKSONVILLE FL 32258

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

MANAGER/OWNER

01/28/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date