

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000105383

Entity Name: OPTIMA HEALTHCARE SOLUTIONS, LLC

Current Principal Place of Business:

40 24TH STREET
1ST FLOOR
PITTSBURGH, PA 15222

Current Mailing Address:

40 24TH STREET
1ST FLOOR
PITTSBURGH, PA 15222 US

FEI Number: 65-0356561

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

COGENCY GLOBAL INC.
115 NORTH CALHOUN ST.
SUITE 4
TALLAHASSEE, FL 32301 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 SOLMBR
Name NET HEALTH SYSTEMS, INC.
Address 40 24TH STREET
1ST FLOOR
City-State-Zip: PITTSBURGH PA 15222

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: PATRICK ROONEY

CFO

03/17/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date