# Entity Name: EMPIRE MEDICAL BILLING & CREDENTIALING LLC

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

### Current Principal Place of Business:

14502 HENSEL LANE APT 240 TAMPA, FL 33613

### **Current Mailing Address:**

DOCUMENT# L16000030220

P.O. BOX 48767 TAMPA, FL 33646 US

### FEI Number: 81-1444745

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

REYES, CATHERINE 14502 HENSEL LANE APT 240 TAMPA, FL 33613 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

### Authorized Person(s) Detail :

TitlePRESIDENTNameREYES, CATHERINEAddress14502 HENSEL LANE<br/>APT 240City-State-Zip:TAMPA FL 33613

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.

PRESIDENT

SIGNATURE: CATHERINE REYES

Electronic Signature of Signing Authorized Person(s) Detail

## FILED Mar 17, 2017 Secretary of State CC5795001395

Certificate of Status Desired: Yes

Date

03/17/2017 Date