## 2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000158990

Entity Name: MEDICAL A/R SOLUTIONS & SERVICES LLC

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

1623 PLAINFIELD AVE ORANGE PARK, FL 32073

## **Current Mailing Address:**

**1623 PLAINFIELD AVE** ORANGE PARK. FL 32073 US

# FEI Number: NOT APPLICABLE

### Name and Address of Current Registered Agent:

HARALSON, MISTY L 1623 PLAINFIELD AVE ORANGE PARK, FL 32073 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: MISTY HARALSON

Electronic Signature of Registered Agent

### Authorized Person(s) Detail :

Title	CEO
Name	HARALSON, MISTY
Address	1623 PLAINFIELD AVE
City-State-Zip:	ORANGE PARK FL 32073

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: MISTY HARALSON

CEO

07/22/2019 Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Jul 22, 2019 Secretary of State 3997952613CC

Certificate of Status Desired: No

07/22/2019 Date