

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000070346

**Entity Name:** ELEMENT MEDICAL BILLING LLC

**Current Principal Place of Business:**

2000 SE PORT SAINT LUCIE BLVD  
SUITE B  
PORT SAINT LUCIE, FL 34952

**Current Mailing Address:**

2000 SE PORT SAINT LUCIE BLVD  
SUITE B  
PORT SAINT LUCIE, FL 34952 US

**FEI Number:** 84-4933467

**Certificate of Status Desired:** No

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

TURNER, JARED  
2000 SE PORT SAINT LUCIE BLVD  
SUITE B  
PORT SAINT LUCIE, FL 34952 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:** JARED TURNER

01/10/2022

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	AMBR	Title	AMBR
Name	TURNER , JARED	Name	KEHER, ERICA
Address	2000 SE PORT SAINT LUCIE BLVD SUITE B	Address	2000 SE PORT SAINT LUCIE BLVD SUITE B
City-State-Zip:	PORT SAINT LUCIE FL 34952	City-State-Zip:	PORT SAINT LUCIE FL 34952

*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:** JARED TURNER

CEO

01/10/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date