

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L22000087295

Entity Name: HFP CSH, LLC

Current Principal Place of Business:

11856 FOXBRIAR LAKE TRAIL
BOYNTON BEACH, FL 33473

Current Mailing Address:

11856 FOXBRIAR LAKE TRAIL
BOYNTON BEACH, FL 33473

FEI Number: 88-0999934

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COMITER, SINGER, BASEMAN & BRAUN, LLP
3825 PGA BLVD STE 701
PALM BEACH GARDENS, FL 33410 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 MGR
Name HEALTHCARE FUNDING PARTNERS,
LLC
Address 11856 FOXBRIAR LAKE TRAIL
City-State-Zip: BOYNTON BEACH FL 33473

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: CHAD SOKOLOFF

MANAGER

04/10/2023

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date