

2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M09000002445

Entity Name: INFORMED MEDICAL MANAGEMENT SERVICES, LLC

Current Principal Place of Business:

3560 DALLAS PARKWAY
FRISCO, TX 75034

Current Mailing Address:

3560 DALLAS PARKWAY
FRISCO, TX 75034 US

FEI Number: 26-3993963

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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: KIMBERLY BAGGETT

02/26/2014

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title SOLE MANAGER
Name MOONEY, STEPHEN M
Address 3560 DALLAS PARKWAY
City-State-Zip: FRISCO TX 75034

Title PRESIDENT
Name NORTH, MEGAN C
Address 15821 VENTURA BLVD
 600
City-State-Zip: ENCINO CA 91436

Title MEMBER
Name CONIFER VALUE-BASED CARE, LLC
Address 3560 DALLAS PARKWAY
City-State-Zip: FRISCO TX 75034

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: STEPHEN MOONEY

SOLE MANAGER

02/26/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date