# 2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M1200006047

Entity Name: HOSPITAL RCM 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: 46-1055000

#### 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:

Electronic Signature of Registered Agent

# Authorized Person(s) Detail :

Title	SOLE MANAGER	Title	MEMBER
Name	MOONEY, STEPHEN M	Name	CONIFER REVENUE CYCLE
Address 3560 DA	3560 DALLAS PARKWAY		SOLUTIONS, LLC
		Address	3560 DALLAS PARKWAY
City-State-Zip:	FRISCO TX 75034		
		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

MANAGER

01/11/2017 Date

Electronic Signature of Signing Authorized Person(s) Detail

FILED Jan 11, 2017 Secretary of State CC6436545586

Date

Certificate of Status Desired: No