

2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M13000000825

Entity Name: HMO AFFILIATES LLC

Current Principal Place of Business:

9865 TRACE VALLEY
ATLANTA, GA 30350

Current Mailing Address:

9865 TRACE VALLEY
ATLANTA, GA 30350

FEI Number: 58-2387816

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NATIONAL CORPORATE RESEARCH, LTD.
155 OFFICE PLAZA
TALLAHASSEE, FL 32301 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 SAUER, ALBERT
Address 9865 TRACE VALLEY
City-State-Zip: ATLANTA GA 30350

Title MGR
Name SCHYBERG, ROBERT
Address 37 WHALE ROCK ROAD
City-State-Zip: BOOTHBAY ME 04537

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: ALBERT SAUER

MANAGER

02/24/2014

Electronic Signature of Signing Authorized Person(s) Detail

Date