## 2014 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M13000004803

Entity Name: CHS HEALTH SERVICES, LLC

**Current Principal Place of Business:** 

5500 MARYLAND WAY SUITE 200 BRENTWOOD, TN 37027

**Current Mailing Address:** 

5500 MARYLAND WAY SUITE 200 BRENTWOOD, TN 37027

FEI Number: 45-1806308 Certificate of Status Desired: Yes

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

Date

**FILED** Jan 09, 2014

**Secretary of State** 

CC6957530796

## Authorized Person(s) Detail:

Title **MGRM** 

CHSW, LLC Name

Address 5500 MARYLAND WAY, SUITE 200

City-State-Zip: BRENTWOOD TN 37027

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.