2020 FOREIGN LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# M14000005352

Entity Name: SULLIVAN HEALTHCARE CONSULTING, LLC

Current Principal Place of Business:

2655 NORTHWINDS PKWY
ALPHARETTA, GA 30009

Current Mailing Address:

2655 NORTHWINDS PKWY
ALPHARETTA, GA 30009

FEI Number: 37-1757894

FILED
Dec 04, 2020
Secretary of State
3038898802CR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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: LINDA J. SNOOK 12/04/2020

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MBR
Name	SULLIVAN HEALTHCARE CONSULTING HOLDINGS, LLC
Address	2655 NORTHWINDS PKWY
City-State-Zip:	ALPHARETTA GA 30009

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: TIPHANIE MCAFEE AUTHORIZED PERSON 12/04/2020

Electronic Signature of Signing Authorized Person(s) Detail — Date