

2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M15000006600

Entity Name: WIREGRASS CLINIC, LLC

Current Principal Place of Business:

4000 MERIDIAN BLVD
FRANKLIN, TN 37067

Current Mailing Address:

4000 MERIDIAN BLVD
FRANKLIN, TN 37067

FEI Number: 27-2239880

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: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title MGR
Name HINGTGEN, TIM L.
Address 4000 MERIDIAN BLVD
City-State-Zip: FRANKLIN TN 37067

Title MGR
Name HAMMONS, KEVIN J
Address 4000 MERIDIAN BLVD
City-State-Zip: FRANKLIN TN 37067

Title MGR
Name FORDHAM, BENJAMIN C
Address 4000 MERIDIAN BLVD
City-State-Zip: FRANKLIN TN 37067

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: BENJAMIN C. FORDHAM

MANAGER

06/03/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date