2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 05, 2018
Secretary of State
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Entity Name: HEALTH AND PSYCHIATRIST CONSULTANTS, LLC

Current Principal Place of Business:

2655 STATE RD 580
SUITE 202
CLEARWATER, FL 33761

Current Mailing Address:

2655 STATE ROAD 580
SUITE 202
CLEARWATER, FL 33761 US

FEI Number: 26-4547620

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

EZAD, USMAN
2655 STATE RD 580
SUITE 202
CLEARWATER, FL 33761 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	DIRECTOR HR & DEVELOPMENT	Title	MEDICAL DIRECTOR
Name	EZAD, USMAN	Name	SAJAN, DINAR DR.
Address	2655 STATE ROAD 580 SUITE 202	Address	2655 STATE RD 580 SUITE 202
City-State-Zip:	CLEARWATER FL 33761	City-State-Zip:	CLEARWATER FL 33761

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: USMAN EZAD — DIRECTOR HR & DEVELOPMENT — 03/05/2018

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