

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000011092

Entity Name: HEALTHCARE ALLIANCE LLC

Current Principal Place of Business:

1435 GULF TO BAY BLVD
SUITE D
CLEARWATER, FL 33755

Current Mailing Address:

1435 GULF TO BAY BLVD
SUITE D
CLEARWATER, FL 33755 US

FEI Number: 27-1809779

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RUIZ, RENE S
1435 GULF TO BAY BLVD
SUITE D
CLEARWATER, FL 33755 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 MGRM
Name RUIZ, GRISEL
Address 6315 GANT RD
City-State-Zip: TAMPA FL 33625

Title MGRM
Name RUIZ, RENE S
Address 6315 GANT RD
City-State-Zip: TAMPA FL 33625

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: RENE RUIZ

CFO

03/04/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date