## 2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000028501

Entity Name: FC MED-FUNDING, LLC

**Current Principal Place of Business:** 

772 US HWY ONE, SUITE 200 NORTH PALM BEACH, FL 33408

**Current Mailing Address:** 

772 US HWY ONE, SUITE 200 NORTH PALM BEACH, FL 33408

FEI Number: 27-2456716 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FUOCO, LOU 772 US HWY ONE, SUITE 200 NORTH PALM BEACH, FL 33408 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 Apr 09, 2015

**Secretary of State** 

CC9857451558

Authorized Person(s) Detail:

Title MGRM Title

Name FUOCO, LOU Name CROSS, JOHN

Address 772 US HWY ONE, SUITE 200 Address 772 US HWY ONE, SUITE 200

City-State-Zip: NORTH PALM BEACH FL 33408 City-State-Zip: NORTH PALM BEACH FL 33408

**MGRM** 

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: LOU FUOCO MEMBER 04/09/2015