

2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000130956

Entity Name: ONPOINT MEDICAL BILLING LLC

Current Principal Place of Business:

7795 DAVIS BOULEVARD
STE 205
NAPLES, FL 34104-5373

Current Mailing Address:

ONEPOINT MEDICAL BILLING LLC
118 BYRON CT
ROTONDA WEST, FL 33947-2433 US

FEI Number: 46-4339855

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WOLF, TAMI
118 BYRON CT
ROTONDA WEST, FL 33947-2433 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	Title	MGR
Name	WOLF, TAMI	Name	WOLF, BARRY
Address	118 BYRON CT	Address	118 BYRON CT
City-State-Zip:	ROTONDA WEST FL 33947-2433	City-State-Zip:	ROTONDA WEST FL 33947-2433

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: BARRY WOLF

MANAGER

01/20/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date