

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000101481

Entity Name: KATAHDIN EMERGENCY PHYSICIANS, LLC

Current Principal Place of Business:

1A BURTON HILLS BLVD.
NASHVILLE, TN 37215

FILED
Apr 23, 2018
Secretary of State
CC6834962231

Current Mailing Address:

6363 S. FIDDLER'S GREEN CIRCLE
SUITE 1400
GREENWOOD VILLAGE, CO 80111 US

FEI Number: NOT APPLICABLE

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	MBR	Title	AUTHORIZED REPRESENTATIVE
Name	EHRA MEDICAL SERVICES OF FLORIDA, LLC	Name	WILSON, CRAIG
Address	6363 S. FIDDLER'S GREEN CIRCLE SUITE 1400	Address	1A BURTON HILLS BLVD.
City-State-Zip:	GREENWOOD VILLAGE CO 80111	City-State-Zip:	NASHVILLE TN 37215

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: CRAIG WILSON

**AUTHORIZED
REPRESENTATIVE**

04/23/2018

Electronic Signature of Signing Authorized Person(s) Detail

Date