

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000122684

Entity Name: ULTIMATE HEALTHCARE CONSULTING, LLC

Current Principal Place of Business:

2702 W. CARLA VISTA DR
CHANDLER, AZ 85224

Current Mailing Address:

2702 W. CARLA VISTA DR
CHANDLER, AZ 85224 US

FEI Number: 30-0549159

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

SPRAGUE, STEVEN
7919 NORTHLAKE PKWAY
ORLANDO, FL 32728 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 P
Name SPRAGUE, SARA
Address 2702 W. CARLA VISTA DR
City-State-Zip: CHANDLER AZ 85224

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: SARA SPRAGUE

PRESIDENT

01/04/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date