

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000079290

Entity Name: OPTIMUM MD BILLING LLC

Current Principal Place of Business:

10700 NW 66TH STREET # 408
DORAL, FL 33178

Current Mailing Address:

10700 NW 66TH STREET # 408
DORAL, FL 33178 US

FEI Number: 90-1034606

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CARRASQUILLO, CHRISTIE
10700 NW 66TH STREET # 408
DORAL, FL 33178 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: CHRISTIE CARRASQUILLO

06/29/2020

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGRM
Name CARRASQUILLO, CARLOS
Address 10700 NW 66TH STREET # 408
City-State-Zip: DORAL FL 33178

Title MGRM
Name CARRASQUILLO, CHRISTIE
Address 10700 NW 66TH STREET # 408
City-State-Zip: DORAL FL 33178

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: CHRISTIE CARRASQUILLO

MGRM

06/29/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date