2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 23, 2016
Secretary of State
CC0753967679

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Entity Name: HEALTHCARE ADMINISTRATION SOLUTIONS, LLC

Current Principal Place of Business:

1835 N.E. MIAMI GARDENS DRIVE
#167
NORTH MIAMI BEACH, FL 33179

Current Mailing Address:

1835 N.E. MIAMI GARDENS DRIVE
#167
NORTH MIAMI BEACH, FL 33179

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GONZALEZ, MARIA E
1835 N.E. MIAMI GARDENS DRIVE
#167
MIAMI, FL 33179 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
Name	GONZALEZ, MARIA E
Address	1835 N.E. MIAMI GARDENS DRIVE #167
City-State-Zip:	MIAMI FL 33179

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: MARIA E. GONZALEZ MEMBER 03/23/2016

Electronic Signature of Signing Authorized Person(s) Detail — Date