

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L21000028079

**Entity Name:** MBI HEALTH SERVICES, LLC

**Current Principal Place of Business:**

7200 WISCONSIN AVE  
702  
BETHESDA, MD 20814

**FILED**  
**Jan 31, 2023**  
**Secretary of State**  
**8126137589CC**

**Current Mailing Address:**

7200 WISCONSIN AVE  
702  
BETHESDA, MD 20814 US

**FEI Number:** 86-1936992

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

CORPORATE SERVICE COMPANY  
1201 HAYS ST.  
TALLAHASSEE, FL 32301 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:** DEB REEVES

01/31/2023

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR	Title	MGR
Name	KAMYA, JOHN	Name	TCHOUFA, ROGER
Address	7200 WISCONSIN AVE 702	Address	7200 WISCONSIN AVE 702
City-State-Zip:	BETHESDA MD 20814	City-State-Zip:	BETHESDA MD 20814

*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:** JOHN KAMYA

PRESIDENT

01/31/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date