

2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M14000008941

Entity Name: ENVOY HEALTH MANAGEMENT, LLC

Current Principal Place of Business:

325 W. ATHERTON ROAD
FLINT, MI 48507

Current Mailing Address:

325 W. ATHERTON ROAD
FLINT, MI 48507 US

FEI Number: 45-2301399

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
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:

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MANAGER
Name GRIFFIN, BRIAN
Address 325 W. ATHERTON ROAD
City-State-Zip: FLINT MI 48507

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: BRIAN GRIFFIN

MANAGER

01/29/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date