2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Aug 17, 2017
Secretary of State
CC4485133984

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Entity Name: HEALTHCARE BILLING SYSTEMS, LLC

Current Principal Place of Business:

298 S YONGE ST
ORMOND BEACH, FL 32174

Current Mailing Address:

298 S YONGE ST
ORMOND BEACH, FL 32174 US

FEI Number: 59-3484980

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CAPITOL CORPORATE SERVICES, INC.
515 EAST PARK AVENUE
2ND FL
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	CEO
Name	DUVA, CHARLES
Address	298 S YONGE ST
City-State-Zip:	ORMOND BEACH FL 32174

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: CHARLES DUVA CEO 08/17/2017

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