

2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M20000009445

Entity Name: WOODSIDE HEALTH FLEMING, LLC

Current Principal Place of Business:

2 SUMMIT PARK DR., STE. 540
CLEVELAND, OH 44131

Current Mailing Address:

2 SUMMIT PARK DR., STE. 540
CLEVELAND, OH 44131

FEI Number: 85-3264358

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 GREULICH, JOSEPH G
Address 2 SUMMIT PARK DR., STE. 540
City-State-Zip: CLEVELAND OH 44131

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: JOSEPH G. GREULICH

MANAGER

04/27/2021

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date