

2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M23000001581

Entity Name: PROVIDER PROMISE LLC

Current Principal Place of Business:

701 S HOWARD AVE STE 203
TAMPA, FL 33606

Current Mailing Address:

701 S HOWARD AVE STE 203
TAMPA, FL 33606 US

FEI Number: 92-0992718

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DEGANANCE, PAUL
701 S HOWARD AVE STE 203
TAMPA, FL 33606 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 M
Name BRESNAHAN, TIMOTHY
Address 701 S HOWARD AVE STE 203
City-State-Zip: TAMPA FL 33606

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: BRESNAHAN , TIMOTHY

MANAGER

04/02/2024

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date