

2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M23000002227

Entity Name: FUSION HEALTHCARE STAFFING, L.L.C.

Current Principal Place of Business:

11339 S. 700 E, STE. 200
SANDY, UT 84070

Current Mailing Address:

11339 S. 700 E, STE. 200
SANDY, UT 84070 US

FEI Number: 46-2470418

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 WESTENSKOW, DANIEL
Address 441 E. CRAPE MYRTLE CIR.
City-State-Zip: DRAPER UT 84020

Title MGR
Name DANA, JARIN
Address 1522 E. CHERRY CREEK LN.
City-State-Zip: DRAPER UT 84020

Title MGR
Name GLEASON, ROBERT
Address 12209 S. HIDDEN VALLEY RD.
City-State-Zip: SANDY UT 84092

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: DANA, JARIN

CFO

01/10/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date