

2015 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000048800

Entity Name: HEALTHSUN HEALTH PLANS, INC.

Current Principal Place of Business:

3250 MARY STREET
SUITE 400
COCONUT GROVE, FL 33133

Current Mailing Address:

200 S. BISCAYNE BLVD.
SUITE 4410
MIAMI, FL 33131 US

FEI Number: 20-0982649

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AUERBACH, MARC H
200 S. BISCAYNE BLVD.
SUITE #4410
MIAMI, FL 33131 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

Officer/Director Detail :

Title DP
Name FUSTER, ALEXANDER
Address 3250 MARY STREET, SUITE 300
City-State-Zip: COCONUT GROVE FL 33133

Title DV
Name ALVAREZ, CLAUDIO
Address 3250 MARY STREET, SUITE 300
City-State-Zip: COCONUT GROVE FL 33133

Title DT
Name CORONA, RAMON
Address 3250 MARY STREET, SUITE 300
City-State-Zip: COCONUT GROVE FL 33133

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 an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ALEXANDER FUSTER

MANAGER

04/29/2015

Electronic Signature of Signing Officer/Director Detail

Date