

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000112495

Entity Name: PRIME HEALTHCARE ANALYTICS, LLC

Current Principal Place of Business:

TWO SOUTH BISCAYNE BOULEVARD
SUITE 2000
MIAMI, FL 33131

Current Mailing Address:

TWO SOUTH BISCAYNE BOULEVARD
SUITE 2000
MIAMI, FL 33131 US

FEI Number: 47-1862020

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CHOUKROUN, DIDIER
TWO SOUTH BISCAYNE BOULEVARD
SUITE 2000
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

Authorized Person(s) Detail :

Title MGR
Name CHOUKROUN, DIDIER
Address TWO SOUTH BISCAYNE BOULEVARD
SUITE 2000
City-State-Zip: MIAMI FL 33131

Title CFO
Name EGOZI CHOUKROUN , ESTHER
VICTORIA
Address TWO SOUTH BISCAYNE BOULEVARD
SUITE 2000
City-State-Zip: MIAMI FL 33131

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: ESTHER EGOZI CHOUKROUN

CFO

02/16/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date