

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000080702

Entity Name: DUKE OF MEDICARE AND HEALTH INSURANCE, LLC

Current Principal Place of Business:

2831 NW 23RD COURT
BOCA RATON, FL 33431

Current Mailing Address:

2831 NW 23RD COURT
BOCA RATON, FL 33431 US

FEI Number: 47-4061340

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

RICHARD, PAUL D
2831 NW 23RD COURT
BOCA RATON, FL 33431 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 AMBR
Name RICHARD, PAUL D
Address 2831 NW 23RD COURT
City-State-Zip: BOCA RATON FL 33431

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: PAUL D RICHARD

OWNER

01/25/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date