## 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L15000192306

Entity Name: AA HEALTH & LIFE INSURANCE LLC

**Current Principal Place of Business:** 

9645 E COLONIAL DR SUITE 113 ORLANDO, FL 32817

## **Current Mailing Address:**

9645 E COLONIAL DR SUITE 113 ORLANDO, FL 32817

FEI Number: 47-5608312 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

MORALES, ELIANA L 4513 SEAFARER WAY ORLANDO, FL 32817 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: ELIANA L MORALES 01/29/2024

Electronic Signature of Registered Agent

Date

FILED Jan 29, 2024

**Secretary of State** 

1790468759CC

## Authorized Person(s) Detail:

Title MGT

Name MORALES, ELIANA
Address 4513 SEAFARER WAY
City-State-Zip: ORLANDO FL 32817

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.