

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000170311

Entity Name: PLATINUM CARE SELECT, LLC

Current Principal Place of Business:

2901 W. CYPRESS CREEK ROAD
SUITE 115
FORT LAUDERDALE, FL 33309

Current Mailing Address:

2901 W. CYPRESS CREEK ROAD
SUITE 115
FORT LAUDERDALE, FL 33309 US

FEI Number: 81-3816372

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JAFFY, EDWARD
2901 W. CYPRESS CREEK ROAD
SUITE 115
FORT LAUDERDALE, FL 33309 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 MANAGER
Name JAFFY, BRETT
Address 2901 W. CYPRESS CREEK ROAD
 SUITE 115
City-State-Zip: FORT LAUDERDALE FL 33309

Title MANAGER
Name JAFFY, EDWARD
Address 2901 W. CYPRESS CREEK ROAD
 SUITE 115
City-State-Zip: FORT LAUDERDALE FL 33309

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: BRETT JAFFY

MANAGER

04/25/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date