

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L16000170311

**Entity Name:** MEDIGAP LIFE, LLC

**Current Principal Place of Business:**

6421 CONGRESS AVENUE  
SUITE 100  
BOCA RATON, FL 33487

**Current Mailing Address:**

6421 CONGRESS AVENUE  
SUITE 100  
BOCA RATON, FL 33487 US

**FEI Number:** 81-3816372

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

FRANK, WEINBERG & BLACK, P.L.  
1875 NW CORPORATE BLVD  
ATTN: ANDREW LEVY, ESQ STE100  
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 MGR  
Name CORTAZAR, VINCENT  
Address 6421 CONGRESS AVENUE  
SUITE 100  
City-State-Zip: BOCA RATON FL 33487

Title OWNER  
Name SCHWARTZ, JAY  
Address 6421 CONGRESS AVENUE  
SUITE 100  
City-State-Zip: BOCA RATON FL 33487

*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:** JAY SCHWARTZ

OWNER

02/21/2019

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date