2016 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M13000001319

Entity Name: URGENT CARE TRAVEL LLC

Current Principal Place of Business:

500 SOUTH POINTE DRIVE STE 230

MIAMI. FL 33139

Current Mailing Address:

500 SOUTH POINTE DRIVE STE 230 MIAMI, FL 33139 US

FEI Number: 46-1691873 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JOHN A. GELETY, PA SOUTHEAST FINANCIAL CENTER 200 S BISCAYNE BLVD., SUITE 2700 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: JOHN A. GELETY 02/25/2016

> Date Electronic Signature of Registered Agent

Authorized Person(s) Detail:

Title **MGRM** Title **MGRM**

SIVA. SURESH Name Name MEHTA. JAIMINI

Address 500 SOUTH POINTE DRIVE STE 230 Address 500 SOUTH POINTE DRIVE STE 230

City-State-Zip: MIAMI FL 33139 City-State-Zip: MIAMI FL 33139

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: JAIMINI MEHTA **MGR**

Electronic Signature of Signing Authorized Person(s) Detail

02/25/2016 Date

FILED Feb 25, 2016

Secretary of State

CC8518904059