## **2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M19000009253

Entity Name: LEVEL2 HEALTH IPA, LLC

**Current Principal Place of Business:** 

5995 OPUS PARKWAY MN082-N200 MINNETONKA, MN 55343

**FILED** Apr 24, 2021 **Secretary of State** 9535222602CC

## **Current Mailing Address:**

5995 OPUS PARKWAY MN082-N200 MINNETONKA, MN 55343 US

FEI Number: 82-3161933 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

CT CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:

MANAGER Title

WEBB, ROBERT THOMAS Name 5995 OPUS PARKWAY Address

MN082-N200

MINNETONKA MN 55343 City-State-Zip:

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.

MANAGER

Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE: ROBERT THOMAS WEBB

04/24/2021 Date