

2012 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L10000113174

FILED
Oct 05, 2012
Secretary of State

Entity Name: ACCESS HEALTH INSURANCE, LLC

Current Principal Place of Business:

2250 NORTH FEDERAL HIGHWAY
BOCA RATON, FL 33431

New Principal Place of Business:

Current Mailing Address:

2250 NORTH FEDERAL HIGHWAY
BOCA RATON, FL 33431

New Mailing Address:

FEI Number: 26-3824466

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLON, PEDRO J
2250 NORTH FEDERAL HIGHWAY
BOCA RATON, FL 33431 US

Name and Address of New Registered Agent:

THEODORE, GEORGE
2250 NORTH FEDERAL HIGHWAY
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: GEORGE THEODORE

10/05/2012

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: COLON, PEDRO J
Address: 16723 SW 117TH AVE.
City-St-Zip: MIAMI, FL 33177

Title: MGRM
Name: GUEDES, JORGE
Address: 16723 SW 117TH AVE.
City-St-Zip: MIAMI, FL 33177

Title: MGRM
Name: THEODORE, GEORGE
Address: 2250 N FEDERAL HWY.
City-St-Zip: BOCA RATON, FL 33431

Title: MGRM
Name: AMICO, ROY T
Address: 2250 NORTH FEDERAL HIGHWAY
City-St-Zip: BOCA RATON, FL 33431

Title: MGRM
Name: HARLEY, MARGUERITE A
Address: 2250 NORTH FEDERAL HIGHWAY
City-St-Zip: BOCA RATON, FL 33431

Title: MGRM
Name: DEMARCO, MATTHEW
Address: 2250 NORTH FEDERAL HIGHWAY
City-St-Zip: BOCA RATON, FL 33431

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: GEORG THEODORE

MGRM

10/05/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date