

217 0001 99094

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

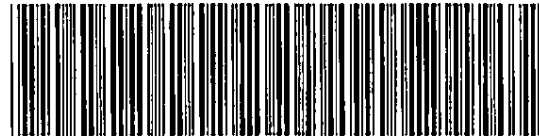
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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Eazy Health Insurance, LLC
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Brett Zimmerman

Name of Person

Eazy Health Insurance, LLC

Firm/Company

6555 North Powerline Road STE 314

Address

Fort Lauderdale, Florida 33309

City/State and Zip Code

brett.eazyhealth@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Brett Zimmerman 954 295-1660
Name of Person at () Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR
LIMITED LIABILITY COMPANY**

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

Eazy Health Insurance, LLC

1. Name of the limited liability company: Eazy Health Insurance, LLC
2. (a) 6555 North Powerline Road STE 314 (b) 6555 North Powerline Road STE 314

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

Fort Lauderdale, FL 33309

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

Fort Lauderdale, FL 33309

09/26/2017

L17000199094

3. 09/26/2017 Date of filing/registration in Florida 4. L17000199094 Document number

Rebecca Ayala

5. (a) Rebecca Ayala
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:
6555 North Powerline Road STE 314

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Fort Lauderdale 33309
FL

Michael Daszkal

- (b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

2401 NW Boca Raton Blvd

NEW Registered Office Address:

Boca Raton 33431-6632
FL

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If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Brett Zimmerman

Michael Daszkal
Signature of a member or authorized representative of a member

Printed or typed name of signer

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified.

Michael Daszkal
Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
FILING FEE: \$25.00