

2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000102031

Entity Name: GHD-GROUP LLC

Current Principal Place of Business:

2525 PONCE DE LEON BOULEVARD,
SUITE 300, CC. CAREPOINTS CARD CORP.
CORAL GABLES, FL 33134

Current Mailing Address:

POST OFFICE BOX, 332175
MIAMI, FL 33233 US

FEI Number: 30-0583831

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

GODWIN, ESHESIMUA WCEO
2525 PONCE DE LEON BOULEVARD,
SUITE 300, CC. CAREPOINTS CARD CORP.
CORAL GABLES, FL 33134 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 MGRM
Name ESHESIMUA, GODWIN W
Address POST OFFICE BOX, 332175
City-State-Zip: MIAMI FL 33233

Title MGR
Name F.I.N.D TRUST EQUITY PARTNERS
Address CC, CONCIERGEMD SERVICES
CORP, 2525 PONCE DE LEON
BOULEVARD,
SUITE 300, CC. CAREPOINTS CARD
CORP.
City-State-Zip: CORAL GABLES FL 33134

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: GODWIN W. ESHESIMUA

GMD

03/20/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date