2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 29, 2019
Secretary of State
2243968070CC

DOCUMENT# L15000167263

Entity Name: PACKAGEMYHEALTH, LLC

Current Principal Place of Business:

2004 SW 103 COURT
MIAMI, FL 33165

Current Mailing Address:

2004 SW 103 COURT
MIAMI, FL 33165 US

FEI Number: 38-3983792

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ZIOMEK, PATRICIA
2004 SW 103 COURT
MIAMI, FL 33165 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: PATRICIA ZIOMEK 03/29/2019

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	AMBR
Name	ZIOMEK, PATRICIA
Address	2004 SW 103 COURT
City-State-Zip:	MIAMI FL 33165

Title	AMBR
Name	SANCHEZ, LIVAN
Address	9141 NW 177 TERRACE
City-State-Zip:	MIAMI FL 33018

Title	AMBR
Name	VARIABLE INVESTMENT PARTNERS LLC
Address	2615 TOURNAMENT PLAYERS CIRCLE SOUTH
City-State-Zip:	BLAINE MN 55449

Title	AMBR
Name	1996 VAN DYKE FAMILY TRUST
Address	74 N BEACH STREET
City-State-Zip:	NANTUCKET MA 02554

Title	AMBR
Name	1996 VAN DYKE FAMILY TRUST
Address	74 N BEACH STREET
City-State-Zip:	NANTUCKET MA 02554

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: PATRICIA ZIOMEK MANAGING MEMBER 03/29/2019

Electronic Signature of Signing Authorized Person(s) Detail — Date