

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000060226

Entity Name: HEALTH PLAN MARKETPLACE, LLC

Current Principal Place of Business:

1127 S. PATRICK DR.
SUITE 1
SATELLITE BEACH, FL 32937

Current Mailing Address:

390 LEE AVE
SATELLITE BEACH, FL 32937 US

FEI Number: 81-1966418

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WILLIAMS, BRUCE E
390 LEE AVE
SATELLITE BEACH, FL 32937 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 MGR
Name WILLIAMS, BRUCE E
Address 390 LEE AVE
City-State-Zip: SATELLITE BEACH FL 32937

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: BRUCE E WILLIAMS _____

AGENT

04/25/2022

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date