

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000170311

Entity Name: MEDIGAP LIFE, LLC**Current Principal Place of Business:**1900 NW CORPORATE BLVD
SUITE W300
BOCA RATON, FL 33431**Current Mailing Address:**1900 NW CORPORATE BLVD
SUITE W300
BOCA RATON, FL 33431 US**FEI Number:** 81-3816372**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FRANK, WEINBERG & BLACK, P.L.
1875 NW CORPORATE BLVD
ATTN: ANDREW LEVY, ESQ STE 100
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:**

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	MGR
Name	CORTAZAR, VINCENT
Address	1900 NW CORPORATE BLVD SUITE W300
City-State-Zip:	BOCA RATON FL 33431

Title	OWNER
Name	SCHWARTZ, JAY
Address	1900 NW CORPORATE BLVD SUITE W300
City-State-Zip:	BOCA RATON FL 33431

Title	PARTNER
Name	HOLLANDER, JEFFREY
Address	1900 NW CORPORATE BLVD SUITE W300
City-State-Zip:	BOCA RATON FL 33431

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: JEFFREY HOLLANDER**PARTNER****01/29/2022**

Electronic Signature of Signing Authorized Person(s) Detail

Date