

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000249065

Entity Name: HEALTHPLEX AMERICA, LLC

Current Principal Place of Business:

200 W. CYPRESS CREEK ROAD, STE. 500
FORT LAUDERDALE, FL 33309

Current Mailing Address:

200 W. CYPRESS CREEK ROAD, STE. 500
FORT LAUDERDALE, FL 33309 US

FEI Number: 83-2329503

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FEINGOLD, GLEN
200 W. CYPRESS CREEK ROAD, STE. 500
FORT LAUDERDALE, FL 33309 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 FEINGOLD, GLEN
Address 200 W. CYPRESS CREEK ROAD, STE.
500
City-State-Zip: FORT LAUDERDALE FL 33309

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: GLEN FEINGOLD

MANAGER

03/05/2019

Electronic Signature of Signing Authorized Person(s) Detail

Date