2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 27, 2025
Secretary of State
5809716890CC

DOCUMENT# L22000006563

Entity Name: YOUR HEALTH QUOTE LLC

Current Principal Place of Business:

6424 NW 5TH WAY
FORT LAUDERDALE, FL 33309

Current Mailing Address:

6424 NW 5TH WAY
FORT LAUDERDALE, FL 33309 US

FEI Number: 87-4332389

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MACCHIA, MICHAEL
405 NE 2ND ST
APT 704
FORT LAUDERDALE, FL 33301 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	MACCHIA, MICHAEL
Address	405 NE 2ND ST, APT 704
City-State-Zip:	FORT LAUDERDALE FL 33301

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: MICHAEL MACCHIA MGR 01/27/2025

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