

2020 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M10000001486

Entity Name: COVENTRY CARELINK INSURANCE SERVICES, LLC

Current Principal Place of Business:

1302 CONCOURSE DRIVE, SUITE 303
LINTHICUM, MD 21090

Current Mailing Address:

1302 CONCOURSE DRIVE, SUITE 303
LINTHICUM, MD 21090

FEI Number: 52-2269725

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 COVENTRY CARELINK INSURANCE
COMPANY OF MD
Address 1302 CONCOURSE DRIVE, SUITE 303
City-State-Zip: LINTHICUM MD 21090

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: MARIA MCILWAIN

LICENSING
ADMINISTRATOR

04/28/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date