

**2018 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M16000003178

**Entity Name:** AFFORDABLE CARE, LLC

**Current Principal Place of Business:**

269 DAVIS DRIVE  
SUITE 300  
MORRISVILLE, NC 27560

**Current Mailing Address:**

P.O. BOX 1042  
KINSTON, NC 28503 US

**FEI Number:** 56-1505559

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

NRAI SERVICES, INC.  
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 MEMBER  
Name AFFORDABLE CARE INTERMEDIATE  
HOLDINGS, LLC  
Address 1400 INDUSTRIAL DRIVE  
City-State-Zip: KINSTON NC 28504

*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:** RANDAL G. AMMONS

**ASSISTANT SECRETARY** 04/29/2018

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date