

**2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M16000009098

**FILED**  
**Apr 30, 2021**  
**Secretary of State**  
**9997039658CC**

**Entity Name:** AHIP FL FORT MYERS ENTERPRISES LLC

**Current Principal Place of Business:**

800-925 WEST GEORGIA STREET  
VANCOUVER, BC V6C 3L2

**Current Mailing Address:**

800-925 WEST GEORGIA STREET  
VANCOUVER, BC V6C 3L2 CA

**FEI Number:** 81-4159131

**Certificate of Status Desired:** No

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

PARACORP INCORPORATED  
155 OFFICE PLAZA DRIVE, 1ST FLOOR  
TALLAHASSEE, FL 32301 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           MANAGER  
Name           KOROL, JONATHAN  
Address       800-925 WEST GEORGIA STREET  
City-State-Zip: VANCOUVER V6C 3L2

Title           MANAGER  
Name           MURPHY, MICHAEL  
Address       800-925 WEST GEORGIA STREET  
City-State-Zip: VANCOUVER BC V6C 3L2

Title           MANAGER  
Name           FRANK, RICHARD  
Address       800-925 WEST GEORGIA STREET  
City-State-Zip: VANCOUVER BC V6C 3L2

*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:** JONATHAN KOROL

**MANAGER**

**04/30/2021**

Electronic Signature of Signing Authorized Person(s) Detail

Date