



0005817235

**STATE OF IDAHO***Office of the secretary of state, Phil McGrane***ANNUAL REPORT**

Idaho Secretary of State  
 PO Box 83720  
 Boise, ID 83720-0080  
 (208) 334-2301  
 Filing Fee: \$0.00

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File #: 0005817235

Date Filed: 7/11/2024 12:02:27 PM

Entity Name and Mailing Address: <b>Entity Name:</b> NAYYA HEALTH INSURANCE CENTER, LLC <b>Foreign Name (name in home jurisdiction):</b> NAYYA HEALTH INSURANCE CENTER, LLC <b>The file number of this entity on the records of the Idaho Secretary of State is:</b> 0005294166 <b>Address</b> 215 PARK AVENUE SOUTH 4TH FLOOR NEW YORK, NY 10003										
<b>Entity Details:</b> <b>Entity Status</b> Active-Existing <b>This entity is organized under the laws of:</b> DELAWARE <b>If applicable, the old file number of this entity on the records of the Idaho Secretary of State was:</b>										
<b>The registered agent on record is:</b> <b>Registered Agent</b> PARACORP INCORPORATED Commercial Registered Agent <b>Physical Address</b> 1555 W SHORELINE DR STE 100 BOISE, ID 83702 <b>Mailing Address</b> 1555 W SHORELINE DR STE 100 BOISE, ID 83702										
<b>Agent or Address Change</b> <input checked="" type="checkbox"/> Select if you are appointing a new agent.										
<b>Limited Liability Company Managers and Members</b> <table border="1"> <thead> <tr> <th>Name</th> <th>Title</th> <th>Business Address</th> </tr> </thead> <tbody> <tr> <td>+ Sina Chehrazi</td> <td>Manager</td> <td>215 PARK AVENUE SOUTH 4TH FLOOR            NEW YORK, NY 10003</td> </tr> <tr> <td>+ Eric Dove</td> <td>Manager</td> <td>215 PARK AVENUE SOUTH 4TH FLOOR            NEW YORK, NY 10003</td> </tr> </tbody> </table>		Name	Title	Business Address	+ Sina Chehrazi	Manager	215 PARK AVENUE SOUTH 4TH FLOOR NEW YORK, NY 10003	+ Eric Dove	Manager	215 PARK AVENUE SOUTH 4TH FLOOR NEW YORK, NY 10003
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The annual report must be signed by an authorized signer of the entity. <b>Job Title:</b> manager										
<b>Sina Chehrazi</b> <b>07/11/2024</b> Sign Here <b>Date</b>										

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