2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000065149

Entity Name: ALTERNATIVE BENEFITS GROUP, LLC

illy Name. ALTERNATIVE BENEFITS GROUP, LI

Current Principal Place of Business:

13105 MAGPIE PLACE BRADENTON, FL 34212

Current Mailing Address:

13105 MAGPIE PLACE BRADENTON, FL 34212

FEI Number: 27-1823411 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CAIRO, PATRICE AMGRM 13105 MAGPIE PLACE BRADENTON, FL 34212 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

Date

FILED Feb 12, 2019

Secretary of State

5737702310CC

Authorized Person(s) Detail:

Title MGRM

Name CAIRO, PATRICE A
Address 13105 MAGPIE PLACE
City-State-Zip: BRADENTON FL 34212

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: PATRICE CAIRO MGRM 02/12/2019