

2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000021292

Entity Name: IDEAL HEALTH BENEFITS LLC**Current Principal Place of Business:**4300 N UNIVERSITY DRIVE E103
LAUDERHILL, FL 33351**Current Mailing Address:**4300 N UNIVERSITY DRIVE E103
LAUDERHILL, FL 33351 US**FEI Number:** 81-1288895**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SILVERSTEIN, JONATHAN
4300 N UNIVERSITY DRIVE E103
LAUDERHILL, FL 33351 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	CEO
Name	SILVERSTEIN, STEVEN
Address	4300 N UNIVERSITY DRIVE E103
City-State-Zip:	LAUDERHILL FL 33351

Title	VP
Name	CASAMAYOURET, LISSA
Address	4300 N UNIVERSITY DRIVE E103
City-State-Zip:	LAUDERHILL FL 33351

Title	COO
Name	SILVERSTEIN, JONATHAN
Address	4300 N UNIVERSITY DRIVE E103
City-State-Zip:	LAUDERHILL FL 33351

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 SILVERSTEIN

COO

04/30/2022

Electronic Signature of Signing Authorized Person(s) Detail

Date