

2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L21000495062

Entity Name: BLOSSOM BENEFITS, LLC

Current Principal Place of Business:

507 S MACDILL AVE
TAMPA, FL 33609

Current Mailing Address:

200 TOLL GATE RD
204
WARWICK, RI 02886 US

FEI Number: 87-3620989

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BENSON, PETER
13572 AVISTA DR
TAMPA, FL 33624 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 MGR
Name COTTON, JESSICA
Address 286 COLLINS RD
City-State-Zip: ASHAWAY RI 02804

Title MGR
Name COTTON, WILLIAM
Address 286 COLLINS RD
City-State-Zip: ASHAWAY RI 02804

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: JESSICA COTTON

MANAGER

05/01/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date