2011 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

FILED
Aug 16, 2011
Secretary of State

DOCUMENT# L09000050709

Entity Name: INSURANCE AND BENEFITS GROUP, LLC

Current Principal Place of Business:

2450 TIM GAMBLE PL
TALLAHASSEE, FL 32308

New Principal Place of Business:

Current Mailing Address:

2450 TIM GAMBLE PL
TALLAHASSEE, FL 32308

New Mailing Address:

FEI Number: 30-0565442 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCEACHIN, DEBBIE
2833 REMINGTON GREEN CT.
TALLAHASSEE, FL 32308 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM
Name: MOODY, HORACE
Address: 2833 REMINGTON GREEN CR.
City-St-Zip: TALLAHASSEE, FL 32308

Title: MGR
Name: MCEACHIN, DEBBIE
Address: 2450 TIM GAMBLE PL
City-St-Zip: TALLAHASSEE, FL 32308

Title: MGR
Name: RUDD, R. L
Address: 415 ASHTON CT
City-St-Zip: QUINCY, FL 32352

I hereby certify that the information indicated on this 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 608, Florida Statues.

SIGNATURE: HORACE MOODY MGRM 08/16/2011

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date