2012 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jan 04, 2012
Secretary of State

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Entity Name: BENEFIRM INSURANCE GROUP, LLC

Current Principal Place of Business:

400 N ASHLEY DRIVE
SUITE 1550
TAMPA, FL 33602

New Principal Place of Business:

Current Mailing Address:

PO BOX 3121
TAMPA, FL 33601

New Mailing Address:

400 N ASHLEY DRIVE
SUITE 1550
TAMPA, FL 33602

FEI Number: 27-5136042 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PIERCE, ROBERT E
400 N ASHLEY DRIVE
SUITE 1550
TAMPA, FL 33602 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: HODGES, JOSEPH
Address: 400 N ASHLEY DRIVE, SUITE 1550
City-St-Zip: TAMPA, FL 33602

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: JOSEPH HODGES MGRM 01/04/2012

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