

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000117633

Entity Name: SKOLNIK BENEFIT SOLUTIONS, LLC

Current Principal Place of Business:

419 E. OAKLAND AVENUE
ORLANDO, FL 34787

Current Mailing Address:

419 E. OAKLAND AVENUE
ORLANDO, FL 34787 US

FEI Number: 26-3964225

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SKOLNIK, ERIK
419 E. OAKLAND AVENUE
ORLANDO, FL 34787 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 SKOLNIK, ERIK
Address 419 E. OAKLAND AVENUE
City-State-Zip: ORLANDO FL 34787

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: SKOLNIK , ERIK

MGR

01/11/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date