

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000064162

**Entity Name:** NATIONAL GROUP BENEFITS, LLC

**Current Principal Place of Business:**

2500 NORTH MILITARY TRAIL  
SUITE 465  
BOCA RATON, FL 33431

**FILED**  
**Mar 12, 2019**  
**Secretary of State**  
**7242152836CC**

**Current Mailing Address:**

2500 NORTH MILITARY TRAIL  
SUITE 465  
BOCA RATON, FL 33431 US

**FEI Number:** 45-5368849

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

LEVINE, DANIEL  
2500 NORTH MILITARY TRAIL  
SUITE 465  
BOCA RATON, FL 33431 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 LEVINE, DANIEL  
Address 2500 NORTH MILITARY TRAIL  
City-State-Zip: BOCA RATON FL 33431

Title MGRM  
Name KAPLAN, THOMAS  
Address 2500 NORTH MILITARY TRAIL  
SUITE 465  
City-State-Zip: BOCA RATON FL 33431

Title MGR  
Name KRAUSS, JEFFREY  
Address 2500 NORTH MILITARY TRAIL  
SUITE 465  
City-State-Zip: BOCA RATON FL 33431

*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:** JEFFREY KRAUSS MGR 03/12/2019  
\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail Date