

**2022 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000162413

**FILED**  
**Mar 17, 2022**  
**Secretary of State**  
**1897331504CC**

**Entity Name:** CONTINENTAL BENEFITS, LLC

**Current Principal Place of Business:**

5701 E HILLSBOROUGH AVE STE 1417  
TAMPA, FL 33610

**Current Mailing Address:**

5701 E HILLSBOROUGH AVE STE 1417  
TAMPA, FL 33610

**FEI Number:** 38-3919227

**Certificate of Status Desired:** No

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

CT CORPORATION SYSTEM  
1200 S PINE ISLAND RD  
PLANTATION, FL 33324 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	Title	AMBR
Name	GONZALEZ, EDMUNDO	Name	MARPAI, INC.
Address	5701 E HILLSBOROUGH AVE STE 1417	Address	5701 E HILLSBOROUGH AVE STE 1417
City-State-Zip:	TAMPA FL 33610	City-State-Zip:	TAMPA FL 33610

*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:** GONZALEZ , EDMUNDO

**CEO**

**03/17/2022**

Electronic Signature of Signing Authorized Person(s) Detail

Date