

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000162413

Entity Name: CONTINENTAL BENEFITS, LLC

Current Principal Place of Business:

5701 E. HILLSBOROUGH AVENUE
NETPARK BUILDING OFFICE SUITE 1417
TAMPA, FL 33610

Current Mailing Address:

5701 E. HILLSBOROUGH AVENUE
NETPARK BUILDING OFFICE SUITE 1417
TAMPA, FL 33610 US

FEI Number: 38-3919227

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LANCASTER, JOHN L
500 SOUTH FLORIDA AVENUE 33801
LAKELAND, FL 33801 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	MANAGER	Title	MGR
Name	WELLENTERPRISES USA, LLC	Name	KNORR, BETSY
Address	ONE URBAN CENTRE - SUITE 100 4830 WEST KENNEDY BOULEVARD	Address	5701 E. HILLSBOROUGH AVENUE SUITE 1417
City-State-Zip:	TAMPA FL 33609	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: BETSY KNORR

CEO

01/04/2021

Electronic Signature of Signing Authorized Person(s) Detail

Date