

2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L16000014319

Entity Name: ULINE BENEFIT CONSULTING, LLC

Current Principal Place of Business:

300 AVENUE OF THE CHAMPIONS, STE 220
PALM BEACH GARDENS, FL 33418

Current Mailing Address:

300 AVENUE OF THE CHAMPIONS, STE 220
PALM BEACH GARDENS, FL 33418 US

FEI Number: 38-3990726

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JONES FOSTER SERVICE, LLC
505 SOUTH FLAGLER DRIVE, SUITE 1100
WEST PALM BEACH, FL 33401 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
Name ULINE BENEFIT SOLUTIONS, LLC
Address 300 AVENUE OF THE CHAMPIONS
 SUITE 220
City-State-Zip: PALM BEACH GARDENS FL 33418

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: THOMAS ULINE

MANAGER

04/29/2019

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date