2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Apr 06, 2021
Secretary of State
8841773560CC

DOCUMENT# L16000022208

Entity Name: AVAIL BENEFITS, LLC

Current Principal Place of Business:

1350 MARKET ST.
SUITE 204
TALLAHASSEE, FL 32312

Current Mailing Address:

P.O. BOX 1733
WAUCHULA, FL 33873 US

FEI Number: 81-1755693

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CROWELL, KIMBERLY A ESQ.
215 SOUTH MONROE ST.
2ND FLOOR
TALLAHASSEE, FL 32301 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	AP	Title	COO, PRESIDENT
Name	ADCOCK, KAYLA	Name	BRYAN, DERREN
Address	204 N 6TH AVE.	Address	P.O. BOX 1733
City-State-Zip:	WAUCHULA FL 33873	City-State-Zip:	WAUCHULA FL 33873

Title	CEO, CFO, CHAIRMAN OF THE BOARD
Name	ALBRITTON, JOSEPH R
Address	P.O. BOX 1733
City-State-Zip:	WAUCHULA FL 33873

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: KAYLA ADCOCK AUTHORIZED PERSON 04/06/2021

Electronic Signature of Signing Authorized Person(s) Detail — Date