

2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000042891

Entity Name: SOUTHERN BENEFIT SOLUTIONS, LLC

Current Principal Place of Business:

2840 REMINGTON GREEN CIRCLE
B
TALLAHASSEE, FL 32308

Current Mailing Address:

PO BOX 15631
TALLAHASSEE, FL 32317 US

FEI Number: APPLIED FOR

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CROSS, JAMES M
2840 REMINGTON GREEN CIRCLE
B
TALLAHASSEE, FL 32308 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	MGR
Name	CROSS, JAMES M	Name	GELABERT, BRITTANY
Address	2840 REMINGTON GREEN CIRCLE B	Address	2840 REMINGTON GREEN CIRCLE B
City-State-Zip:	TALLAHASSEE FL 32308	City-State-Zip:	TALLAHASSEE FL 32308

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: JAMES M CROSS

MEMBER

01/23/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date