

**2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L19000027225

**Entity Name:** MAPBENEFITS HOLDINGS, LLC

**Current Principal Place of Business:**

5690 W. CYPRESS ST  
SUITE A  
TAMPA, FL 33607

**FILED**  
**Apr 12, 2021**  
**Secretary of State**  
**1390713668CC**

**Current Mailing Address:**

5690 W. CYPRESS ST  
SUITE A  
TAMPA, FL 33607 US

**FEI Number: 32-0604840**

**Certificate of Status Desired: No**

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

MEZRAH, TODD M  
5690 W. CYPRESS ST  
SUITE A  
TAMPA, FL 33607 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  
Name MEZRAH, TODD M  
Address 5690 W. CYPRESS ST  
SUITE A  
City-State-Zip: TAMPA FL 33607

*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: TODD MEZRAH**

**CEO**

**04/12/2021**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date