2020 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

FILED
Nov 14, 2020
Secretary of State
2910815253CR

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Entity Name: SOCIAL SECURITY DISABILITY ATTORNEY, P.L.L.C.

Current Principal Place of Business:

1515 EAST SILVER SPRINGS BLVD
SUITE 1186
OCALA, FL 34470

Current Mailing Address:

1515 EAST SILVER SPRINGS BLVD
SUITE 1186
OCALA, FL 34470 US

FEI Number: 84-3295918

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ROSS, MICHAEL L
5400 SW COLLEGE RD
SUITE 305
OCALA, FL 34474 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: MICHAEL ROSS 11/14/2020

Electronic Signature of Registered Agent — Date

Authorized Person(s) Detail :

Title	MGR
Name	ROSS, MICHAEL L
Address	1515 EAST SILVER SPRINGS BLVD SUITE 1186
City-State-Zip:	OCALA FL 34470

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: MICHAEL ROSS OWNER 11/14/2020

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