

2021 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M19000001616

Entity Name: LIDAC EMPLOYEE BENEFIT SOLUTIONS, LLC**Current Principal Place of Business:**100 OTTAWA AVE. SW
GRAND RAPIDS, MI 49503**Current Mailing Address:**100 OTTAWA AVE. SW
GRAND RAPIDS, MI 49503 US**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525 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	ACRISURE MGA, LLC
Address	100 OTTAWA AVE. SW
City-State-Zip:	GRAND RAPIDS MI 49503

Title	VP
Name	KOLENDA, COURTNEY L.
Address	100 OTTAWA AVE. SW
City-State-Zip:	GRAND RAPIDS MI 49503

Title	CFO
Name	VATIKIOTIS, SOZON
Address	100 OTTAWA AVE. SW
City-State-Zip:	GRAND RAPIDS MI 49503

Title	CFO
Name	SNYDER, KENT
Address	100 OTTAWA AVE. SW
City-State-Zip:	GRAND RAPIDS MI 49503

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: COURTNEY L. KOLENDA

VICE PRESIDENT

04/20/2021

Electronic Signature of Signing Authorized Person(s) Detail_____
Date