

2022 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M19000003929

Entity Name: BENCHMARK ADMINISTRATORS, LLC**Current Principal Place of Business:**875 CONCOURSE PKWY S, STE 160
MAITLAND, FL 32751**Current Mailing Address:**P.O. BOX 940097
MAITLAND, FL 32794 US**FEI Number:** 81-1896786**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 PRESIDENT
Name BARON, JULIE
Address 150 LAKE STREET WEST
City-State-Zip: WAYZATA MN 55391

Title MANAGER
Name O'BRIEN, ANDREW
Address 150 LAKE STREET WEST
City-State-Zip: WAYZATA MN 55391

Title CFO
Name VASSALLO, NICHOLAS
Address 150 LAKE STREET WEST
City-State-Zip: WAYZATA MN 55391

Title OTHER, SENIOR VICE PRESIDENT -
 CLAIMS
Name CLIFTON, DEAN
Address 150 LAKE STREET WEST
City-State-Zip: WAYZATA MN 55391

Title GENERAL COUNSEL
Name RYAN, PATRICIA
Address 150 LAKE STREETWEST
City-State-Zip: WAYZATA MN 55391

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: PATRICIA RYAN**GENERAL COUNSEL****04/05/2022**_____
Electronic Signature of Signing Authorized Person(s) Detail_____
Date