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(Re	equestor's Name)	
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SECRETARY OF STATE CIVISION OF CORPORATION

08 JAN 31 PN 2:37

J. BRYAN
FEB - 1 2008

EXAMINER

COVER LETTER

TO: Registration Division of C			
SUBJECT: PUBLI	C ADJUSTERS LLC		***************************************
•	(Name of Lin	nited Liability Company)	
The enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.	
Please return all corres	spondence concerning this matte	r to the following:	
	DANIEL CZERWINS		
		(Name of Person)	
		(Firm/Company)	. 80 SEANG
	15121 SW 87 AVEN	(Address)	JAN 3
	MIAMI FL 33176	(Attuces)	RAY OF PI
	MIAMITE 05170	(City/State and Zip Code)	DB JAN 31 PH 2: 37
For further information	n concerning this matter, please of	call:	J SK
DANIEL CZERW (Narr	/INSKI ne of Person)	at (<u>305</u>) <u>235-2136</u> (Area Code & Daytime Te	lephone Number)
Enclosed is a check for	r the following amount:		,
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

DIVISION OF CORPORATIONS

PUBLIC ADJUSTERS LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 3/29/06 and assigned Florida document number L06000032648 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: (Enter Florida street address) (City) New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

(If Changing Registered Agent, Signature of New Registered Agent)

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

	<u>Name</u>	<u>Address</u>	Type of Action
			Add Remove
· · · · · · · · · · · · · · · · · · ·			Add Remove DV
			Add 3
			Remove
			Add Remove
			Add Remove
. If amend	ling any other information, enter chang	e(s) here: (Attach additional sheets, if necessary.)	_
. —			_ _
	Vinican 29th 22		<u> </u>

Page 2 of 2

Filing Fee: \$25.00