MIZOOOHZSZ

(Re	equestor's Name)	
(Address)		
(Ac	ldress)	
(City/State/Zip/Phone #)		
PICK-UP	WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



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11/04/13--01030--001 **25.00

J. SAULSBERRY EXAMINER NOV 6 2013



CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Evelyn Wright

Date: November 1, 2013

Order#: 856643-009

Re: CLEAR POINT CLAIMS, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.00.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Evelyn Wright

c/o Corporation Service Company
2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

2013 NOV -4 AM 10: 36

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: <u>CLEAR POINT C</u>	LAIMS, LLC
2. (a) Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	13925 Ballantyne Corporate Place Suite 190 Charlotte, NC 28277
(b) Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	
07/30/2012	M12000004282
3. Date of filing/registration in Florida	. Document number
5. (a) Registered Agent and Registered Office shown on the	ne records of the Florida Dept. of State:
Registered Agent:	National Corporate Research Ltd., Inc.
Registered Office Address:	155 Office Plaza Drive Tallahassee, FL 32301
(b) Enter name of NEW Registered Agent and/or NEW	Registered Office address:
NEW Registered Agent:	Corporation Service Company
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1201 Hays Street
	Tallahassee ,FL 32301
If the limited liability company is not organized under the la confirmed that after the change or changes are made, the Floand the business office of the registered agent will be identically company, it is hereby confirmed that the change(s) the members of the limited liability company or as otherwise the operating agreement of the limited liability company.	orida street address of the registered office
Signature of a member or authorized representative of a member	
Dona Priebe, Authorized Person Printed or typed name of signee	
I hereby accept the appointment as registered agent and ag comply with the provisions of all statutes relative to the proj and I am familiar with and accept the obligations of my pos Chapter 608, F.S. Or, if this document is being filed to mer address, I hereby confirm that the limited liability company By:	ree to act in this capacity. I further agree to per and complete performance of my duties, ition as registered agent as provided for in ely reflect a change in the registered office has been notified in writing of this change.
	Grace E. Kirby, Asst VP
Division of Corporations, P.O. Box 632	7, Tallahassee, FL 32314

FILING FEE: \$25.00

INHS18 (05/08)