

2013 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L01000021644

Entity Name: FLORIDA RECOVERIES, L.L.C.

Current Principal Place of Business:

ONE S.E. THIRD AVE.
SUITE 2250
MIAMI, FL 33131

Current Mailing Address:

ONE S.E. THIRD AVE.
SUITE 2250
MIAMI, FL 33131

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AMKE REGISTERED AGENTS, L.L.C.
2250 SUNTRUST INTERNATIONAL CENTER
ONE S.E. THIRD AVE.
MIAMI, FL 33131 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 KALIL, CRAIG P
Address ONE SE THIRD AVENUE SUITE 2250
City-State-Zip: MIAMI FL 33131

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 608, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CRAIG P. KALIL

MANAGER

04/23/2013

Electronic Signature of Signing Authorized Person(s) Detail

Date