

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L11000080641

Entity Name: 1ST RESPONSE APPRAISAL LOSS CONSULTANTS, LLC

Current Principal Place of Business:

15160 SW 136 STREET
SUITE #13
MIAMI, FL 33196

Current Mailing Address:

15160 SW 136 STREET
SUITE #13
MIAMI, FL 33196 US

FEI Number: 45-2735415

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GAMEZ, ADRIAN A
15160 SW 136 STREET
SUITE #13
MIAMI, FL 33196 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 MGRM
Name GAMEZ, ADRIAN A
Address 15160 SW 136 STREET SUITE #13
City-State-Zip: MIAMI FL 33196

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: ADRIAN GAMEZ

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04/20/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date